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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JUN 10 2010

EXAMINER

EFFECTIVE DATE 7/1/10

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Loli Lili
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alan and Kathleen Busenbark
Name of Person

The Loli Lili
Firm/Company

14227 Turkey Creek Drive
Address

Tallahassee, FL 32312
City/State and Zip Code

the.loli.lili@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathleen Busenbark at (850) 893-3947
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Loli Lili, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

14227 Turkey Creek Drive
Tallahassee, FL 32312

14227 Turkey Creek Drive
Tallahassee, FL 32312

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Mary Kathleen Busenbark

Name

14227 Turkey Creek Drive

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee FL 32312

City, State, and Zip

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Mary Kathleen Busenbark
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE 7/1/10

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Mary Kathleen Busenbark
14227 Turkey Creek Drive
Tallahassee, FL 32312

MGR

Alan Edwin Busenbark
14227 Turkey Creek Drive
Tallahassee, FL 32312

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: July 1, 2010. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Mary Kathleen Busenbark
Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Mary Kathleen Busenbark
Typed or printed name of signee

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10 JUN -9 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FL 32304

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)