

L10000124129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

W1-52419

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W1-51345  
**A. LUNT**  
DEC -2 2010  
**EXAMINER**

Office Use Only



600187482716

11/08/10--01040--010 \*\*130.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 NOV 29 PM 3:29

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 9, 2010

BARBARA ADCOCK  
161 EDGEWATER WAY  
MERRITT ISLAND, FL 32953

SUBJECT: MT CELCEILA LLC  
Ref. Number: W10000052419

We have received your document for MT CELCEILA LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name you are requesting is unavailable, since it has been previously requested by another individual and the document was returned to the individual for corrections and has not yet been resubmitted.

The document number of the name conflict is W10000051345.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 210A00026359

## TRANSMITTAL LETTER

TO: REGISTRATION SECTION  
DIVISION OF CORPORATIONS

SUBJECT: MT CELCEILA LLC

THE ENCLOSED ARTICLES OF ORGANIZATION AND FEE(S) ARE SUBMITTED FOR FILING.

PLEASE RETURN ALL CORRESPONDENCE CONCERNING THIS MATTER TO THE FOLLOWING:

MT CELCEILA LLC  
C/O BARBARA ADCOCK  
161 EDGEWATER WAY  
MERRITT ISLAND, FL 32953

FOR FURTHER INFORMATION CONCERNING THIS MATTER, PLEASE CALL:

BARBARA ADCOCK 321-720-7608

ENCLOSED IS A CHECK FOR THE FOLLOWING AMOUNT:

<input type="checkbox"/> \$125.00 FILING FEE	<input checked="" type="checkbox"/> \$130.00 FILING FEE & CERTIFICATE OF STATUS	<input type="checkbox"/> \$155.00 FILING FEE & CERTIFIED COPY*	<input type="checkbox"/> \$160.00 FILING FEE CERTIFICATE OF STATUS & CERTIFIED COPY*
----------------------------------------------	------------------------------------------------------------------------------------	-------------------------------------------------------------------	--------------------------------------------------------------------------------------------

\*(ADDITIONAL COPY ENCLOSED)

### STREET ADDRESS:

REGISTRATION SECTION  
DIVISION OF CORPORATIONS  
409 E. GAINES STREET  
TALLAHASSEE, FL 32399

### MAILING ADDRESS:

REGISTRATION SECTION  
DIVISION OF CORPORATIONS  
P O BOX 6327  
TALLAHASSEE, FL 32314

2010 NOV 29 PM 3:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

## TRANSMITTAL LETTER

TO: REGISTRATION SECTION  
DIVISION OF CORPORATIONS

SUBJECT: A DAUGHTERS HEART LLC

THE ENCLOSED ARTICLES OF ORGANIZATION AND FEE(S) ARE SUBMITTED FOR FILING.

PLEASE RETURN ALL CORRESPONDENCE CONCERNING THIS MATTER TO THE FOLLOWING:

A DAUGHTERS HEART LLC  
C/O BARBARA ADCOCK  
161 EDGEWATER WAY  
MERRITT ISLAND, FL 32953

FOR FURTHER INFORMATION CONCERNING THIS MATTER, PLEASE CALL:

BARBARA ADCOCK 321-720-7608

ENCLOSED IS A CHECK FOR THE FOLLOWING AMOUNT:

<input type="checkbox"/> \$125.00 FILING FEE	<input checked="" type="checkbox"/> \$130.00 FILING FEE & CERTIFICATE OF STATUS	<input type="checkbox"/> \$155.00 FILING FEE & CERTIFIED COPY*	<input type="checkbox"/> \$160.00 FILING FEE CERTIFICATE OF STATUS & CERTIFIED COPY*
----------------------------------------------	------------------------------------------------------------------------------------	-------------------------------------------------------------------	--------------------------------------------------------------------------------------------

\*(ADDITIONAL COPY ENCLOSED)

### STREET ADDRESS:

REGISTRATION SECTION  
DIVISION OF CORPORATIONS  
409 E. GAINES STREET  
TALLAHASSEE, FL 32399

### MAILING ADDRESS:

REGISTRATION SECTION  
DIVISION OF CORPORATIONS  
P O BOX 6327  
TALLAHASSEE, FL 32314

FILED  
2010 NOV 29 PM 3:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE 1- NAME**

**THE NAME OF THE LIMITED LIABILITY COMPANY IS:**

**A DAUGHTERS HEART LLC**

**ARTICLE II - ADDRESS**

THE MAILING ADDRESS AND STREET ADDRESS OF THE PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

**PRINCIPAL OFFICE ADDRESS**

161 EDGEWATER WAY  
MERRITT ISLAND, FL 32953

**MAILING ADDRESS**

161 EDGEWATER WAY  
MERRITT ISLAND FL 32953

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT'S SIGNATURE:**

THE NAME AND THE FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS:

BARBARA ADCOCK

4021 GRAPEHILL STREET

COCOA, FL 32926

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.

  
REGISTERED AGENTS SIGNATURE

2010 NOV 29 PM 3:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**ARTICLE IV - MANAGER(S) OR MANAGING MEMBER IS AS  
FOLLOWS:**

THE NAME AND ADDRESS OF EACH MANAGER OR MANAGING MEMBER IS AS FOLLOWS:

TITLE:	NAME & ADDRESS
"MGR"= MANAGER	
"MGRM= MANAGING MEMBER	
MGR	BARBARA ADCOCK 4021 GRAPEHILL STREET COCOA, FL 32926

MGRM

MGRM

FILED  
2010 NOV 29 PM 3:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOTE: AN ADDITIONAL ARTICLE MUST BE ADDED IF AN EFFECTIVE DATE IS REQUESTED.

**REQUIRED SIGNATURE:BARBARA ADCOCK**

x *Barbara L. Adcock*

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.)

BARBARA ADCOCK  
TYPED OR PRINTED NAME OF SIGNEE

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)