

L110000003850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000188885110

12/27/10--01010--023 **130.00

Effective Date

01/01/11

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
DEC 27 AM 8:47

T. HAMPTON

JAN 11 2011

EXAMINER

28765-0101

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sharon's Garden Honey

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:

Sharon Lemons

Name of Person

Sharon's Garden Honey

Firm/Company

8730 Pinion Dr

Address

Lake Worth, FL 33467-1127

City/State and Zip Code

sharon@sharonsgardenhoney.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon Lemons

Name of Person

at (**561**) **718-1062**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 JAN 10 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

December 28, 2010

SHARON LEMONS
8730 PINION DR
LAKE WORTH, FL 33467-1127

SUBJECT: SHARON'S GARDEN HONEY, LLC
Ref. Number: W10000059482

We have received your document for SHARON'S GARDEN HONEY, 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 registered agent must sign accepting the designation.

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) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 810A00029891

Effective Date 01/01/11

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sharon's Garden Honey, 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:

8730 Pinion Dr
Lake Worth, FL 33467-1127

Mailing Address:

8730 Pinion Dr
Lake Worth, FL 33467-1127

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:

Sharon Lemons

Name

8730 Pinion Dr

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

Lake Worth

FL 33467-1127

City, State, and Zip

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 Agent's Signature (REQUIRED)

(CONTINUED)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 27 AM 8:41

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

Sharon Lemons

8730 Pinion Dr

Lake Worth, FL 33467-1127

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1-1-2011. (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:



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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Sharon Lemons

Typed or printed name of signer

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 27 AM 8:41