

L11000010706

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

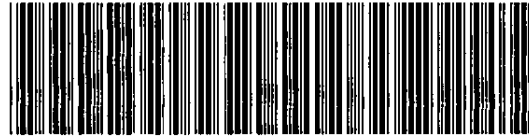
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/17/10--01012--014 **155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JAN 18 AM 11:58

FILED

C. LEWIS

Jan. 26 2011

EXAMINER



November 5, 2010

To whom it may concern,

Please find below my business address and phone number.

Sincerely,

Angelique Hofacre, CEO
Advanced Marketing Concepts



January 14, 2011

Carolyn Lewis,

Please find below my business address and phone number.

I have already filed and paid for an LLC but was unsuccessful due to the name Advanced Marketing Concepts is currently in use. I attached that letter as well as the new name. I was not sure if I had to file dba with the changed name so I sent two, one with dba and one without as well as the fictitious name. Please use the one that will work to create Queen Enterprises LLC.

Sincerely,

Angelique Hofacre



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 19, 2011

ANGELIQUE HOFACRE
QUEEN ENTERPRISES LLC
6329 GRAND BLVD.
NEW PORT RICHEY, FL 34652

SUBJECT: QUEEN ENTERPRISES LLC
Ref. Number: W10000054184

We have received your document for QUEEN ENTERPRISES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 910A00027094

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Queen Companies LLC

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:

Angelique Hofacre

Name of Person

Queen Companies LLC

Firm/Company

6329 Grand Blvd.

Address

New Port Richey, FL 34652

City/State and Zip Code

angelique@outsourcedbdc.com

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

For further information concerning this matter, please call:

Angelique Hofacre

Name of Person

at (727)

326-2229

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Queen Companies 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:

6329 Grand Blvd.
New Port Richey, FL 34652

Mailing Address:

6329 Grand Blvd.
New Port Richey, FL 34652

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:

Angelique Hofacre

Name

6414 Missouri Ave

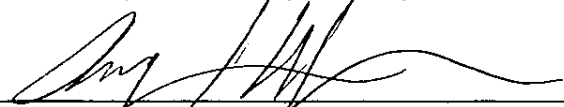
Florida street address (P.O. Box NOT acceptable)

New Port Richey FL 34653

City, State, and Zip

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2011 JAN 18 AM 11:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

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

2011 JAN 18 AM 11:54

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGR

Angelique Hofacre
6414 Missouri Ave
New Port Richey, FL 34653

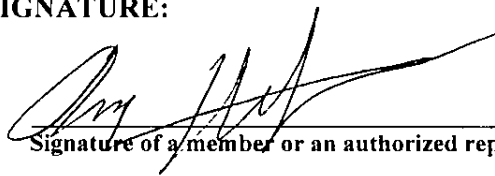
MGR

Donald Queen
6414 Missouri Ave
New Port Richey, FL 34653

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 10th 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.)

Angelique Hofacre

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)