

L11000029602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

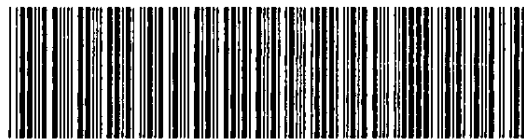
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600194058716

02/14/11--01019--012 **125.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

MAR 10 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Barber's Shop 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:

Thomas D Sakezles

Name of Person

Firm/Company

220 East Bearss Avenue

Address

Tampa, Florida 33613

City/State and Zip Code

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

For further information concerning this matter, please call:

James L Mashlonik

Name of Person

at (813) 802-9155

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Barber's Shop 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:

220 East Bearss Avenue
Tampa, Florida 33613

Mailing Address:

220 East Bearss Avenue
Tampa, Florida 33613

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:

Gail Sakezles

Name

220 East Bearss Avenue

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


Tampa

FL 33613

City, State, and Zip

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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)

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:

MGRM

Thomas D Sakezles

220 East Bearss Avenue

Tampa, Florida 33613

(Use attachment if necessary)

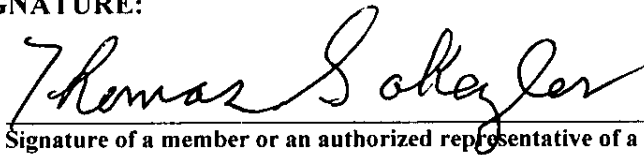
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TALLAHASSEE, FLORIDA

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ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

Thomas D Sakezles

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)

Thomas D. Sakezles
220 East Bearss Avenue, Tampa, Florida 33613-1625

February 28, 2011

Florida Department of State
Division of Corporations
Corporate Records
P.O. Box 6327
Tallahassee, Florida 32314-6327

Re: The Barber's Shop, LLC
Document No. L08000107170
Ref. No. W11000009329

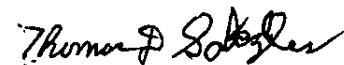
Dear Ms. Jeraline Saulsberry,

This letter follows up on your recent inquiry regarding the above captioned limited liability company ("LLC").

I am the sole owner of the LLC. The LLC was administratively dissolved on September 24, 2010 by your Department. **I have no intention of reinstating the LLC or otherwise using the name in association with the LLC.** Accordingly, you should consider the name released for use to another entity.

I am enclosing original papers received by your Department on February 14, 2011 under bar code 600194058716 and your cover letter dated February 16, 2011. Please process this new LLC as soon as possible. Thank you.

Sincerely,



Thomas D. Sakezles

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TALLAHASSEE, FLORIDA