

L11000032642

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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EFFECTIVE DATE 03-12-11

FILED

11 MAR 16 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

MAR 17 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: StyleNewbie MYK, 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:

Milijana Ugrenovic

Name of Person

Firm/Company

2755 Via Capri #1222

Address

Clearwater, FL 33764

City/State and Zip Code

stylenewbiemj@gmail.com

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

For further information concerning this matter, please call:

Yury Salavarrieta

Name of Person

at (727) 4881259

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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11 MAR 16 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

StyleNewbie MYK, 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:

2755 Via Capri #1222
Clearwater, FL 33764

Mailing Address:

2755 Via Capri #1222
Clearwater, FL 33764

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:

Nevenka Ugrenovic

Name

5116 Larch Lane

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

New Port Richey FL 34653

City, State, and Zip

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11 MAR 16 AM 11:45
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..

Nevenka Ugrenovic

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:

MGR

Milijana Ugrenovic

2755 Via Capri #1222

Clearwater, FL 33764

MGR

Yury M Salavarrieta

14330 58th ST N Apt 4206

Clearwater, FL 33760

MGR

Katarina Mitrovic

7199 61st Ave N

Saint Petersburg, FL 33709

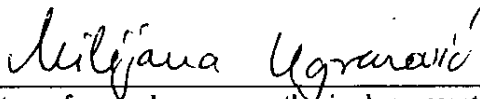
11 MAR 16 AM 11:45
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: march 12, 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.)

Milijana Ugrenovic

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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2011

MILIJANA UGRENOVIC
2755 VIA CAPRI #1222
CLEARWATER, FL 33764

SUBJECT: STYLENEWBIE MYK, LLC
Ref. Number: W11000015171

FILED
11 MAR 16 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for STYLENEWBIE MYK, LLC and your check(s) totaling \$125.00. 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.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

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) 245-6028.

Barbara Bostick
Regulatory Specialist II

Letter Number: 811A00006415