

L11000091239

(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:

W11000039415

Office Use Only



100210222711

07/26/11--01011--003 **125.00

FILED
11 AUG -8 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

8/1/11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 27, 2011

TERRANCE J. UNDERWOOD
523 PARK DRIVE
KEY WEST, FL 33040

SUBJECT: TRAVEL VACATION AUTHORITY LLC
Ref. Number: W11000039415

We have received your document for TRAVEL VACATION AUTHORITY 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 name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 911A00017749

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11 AUG - 8 PM 12:34
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRAVEL VACATION AUTHORITY 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:

TERRENCE J. UNDERWOOD

Name of Person

TRAVEL VACATION AUTHORITY LLC

Firm/Company

523 PARK DRIVE

Address

KEY WEST, FLORIDA 33040

City/State and Zip Code

terry.keywestinfocenter@gmail.com

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

For further information concerning this matter, please call:

TERRENCE J. UNDERWOOD

Name of Person

at (305) 896-3833

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

FILED
11 AUG - 8 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TERRENCE UNDERWOOD

**523 Park Drive
Key West, FL 33040**

August 4, 2011

Deborah Bruce, Regulatory Specialist II
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Dear Ms. Bruce:

I, Terrence Underwood, give permission for you to release Travel Vacation Authority, Inc. to myself as Travel Vacation Authority LLC under active file #W11000039415. The Employer Identification Number assigned to Travel Vacation Authority LLC is **45-2800607**. The active date is August 1, 2011.

Sincerely,



Terrence Underwood

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TRAVEL VACATION AUTHORITY 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:

523 PARK DRIVE
KEY WEST, FL 33040

Mailing Address:

523 PARK DRIVE
KEY WEST, FL 33040

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:

TERRENCE J. UNDERWOOD

Name

523 PARK DRIVE

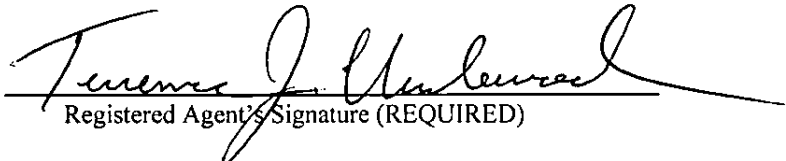
Florida street address (P.O. Box **NOT** acceptable)

KEY WEST FL 33040

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)

8/1/11

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

TERRENCE J. UNDERWOOD

523 PARK DRIVE

KEY WEST, FL 33040

MGRM

SANDRA UNDERWOOD

523 PARK DRIVE

KEY WEST, FL 33040

MGRM

VITALY USTALOV

3314 NORTHSIDE DRIVE

KEY WEST, FL 33040

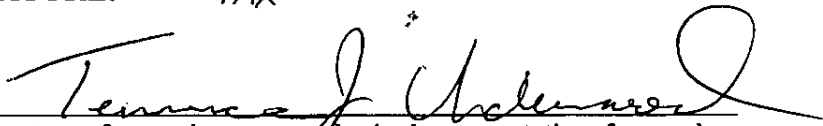
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 8/1/2011 (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:

Tax # 45-2800607


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.)

TERRENCE J. UNDERWOOD

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)

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TALLAHASSEE, FLORIDA