

L11000127647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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11 NOV - 8 PM 1:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

611-54813

J. BRYAN

NOV - 9 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 26, 2011

MICHAEL P. OLIVARI, ESQUIRE  
KANEY & OLIVARI, P.L.  
55 SETON TRAIL  
ORMOND BEACH, FL 32176

SUBJECT: OCEAN SERENADE, LLC  
Ref. Number: W11000054813

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TALLAHASSEE, FLORIDA

We have received your document for OCEAN SERENADE, LLC and your check(s) totaling \$160.00. 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 existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations:

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is #P96000071145, OCEAN SERENADE, INC..

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's

requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 011A00024464

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TALLAHASSEE, FLORIDA

# KANEY & OLIVARI, P.L.

## ATTORNEYS AT LAW

55 Seton Trail • Ormond Beach, FL 32176  
Ph (386) 675-0691 • Fax (386) 672-7003  
[www.KaneyOlivari.com](http://www.KaneyOlivari.com)

Jonathan D. Kaney Jr.  
Jonathan D. Kaney III  
Michael P. Olivari

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11 NOV -8 PM 1:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

November 4, 2012

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Dear Mr. Bryan,

Per your letter dated October 26, 2011 as attached enclosed please find our cover letter and articles of incorporation for OCEAN HAMMOCK SERENADE, LLC for filing with the Florida Department of State. Your office already has our check in the amount of \$160.00 to cover the filing fee. Please contact our office should you have any questions or need further assistance.

Thank you.

Sincerely,



**Michael P. Olivari**

Telephone: (386) 675-0691

Email: [mike@kaneyolivari.com](mailto:mike@kaneyolivari.com)

Fax: (386) 672-7003

MPO:klm  
Enclosure

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Ocean Hammock Serenade, 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:

Michael P. Olivari, Esquire

Name of Person

Kaney & Olivari, PL

Firm/Company

55 Seton Trail

Address

Ormond Beach, FL 32176

City/State and Zip Code

mike@kaneyolivari.com

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

For further information concerning this matter, please call:

Michael P. Olivari

Name of Person

at ( 386 ) 675-0691

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)

*already have*

**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

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Ocean Hammock Serenade, 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:**

41 Marston Drive  
Bedford, NH 03110

**Mailing Address:**

41 Marston Drive  
Bedford, NH 03110

**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:

Michael P. Olivari, Esquire

Name

55 Seton Trail

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

Ormond Beach FL 32176

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)

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**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

Chauncey Holden, Trustee of the Chauncey  
Holden Revocable Trust u/a/d 2/20/09  
41 Marston Dr., Bedford, NH 32110

MGRM

Lauraine Holden, Trustee of the Lauraine  
Holden Revocable Trust u/a/d 2/20/09  
41 Marston Dr., Bedford, NH 32110

\_\_\_\_\_

\_\_\_\_\_

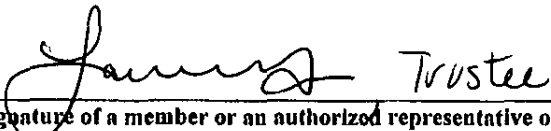
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(Use attachment if necessary)

**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:**

 Trustee  
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.)

Lauraine Holden, Trustee

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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