

L12000027096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

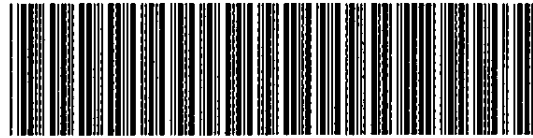
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400222420994

02/24/12--01014--027 **160.00

FILED
12 FEB 24 PM 12:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Cullen FEB 27 2012

Stella Bella Entertainment

2109 SW 10th Ave

Fort Lauderdale, Florida 33315

Phone: (954) 200-4019

Dear Sir or Madam:

Please see enclosed the application for LLC status. Thank you for your time and attention in this matter.

A handwritten signature in black ink, consisting of several overlapping loops and a long horizontal stroke extending to the right.

Regards,

Paul C. Catledge

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STELLA BELLA ENTERTAINMENT
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:

PAUL CATLEDGE
Name of Person

Firm/Company

2109 SW 10th AVE
Address

FT. LAUDERDALE, FL 33315
City/State and Zip Code

paulcatledge@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL CATLEDGE at (954) 200-4019
Name of Person 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:

STELLA BELLA ENTERTAINMENT, L.L.C.
(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:

2109 SW 10th AVE
Ft. Lauderdale, FL 33315

Mailing Address:

2109 SW 10th AVE
Ft. Lauderdale, FL 33315

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:

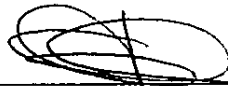
PAUL CATLEDGE
Name

2109 SW 10th AVE
Florida street address (P.O. Box NOT acceptable)

Fort Lauderdale FL 33315
City, State, and Zip

FILED
12 FEB 24 PM 12:23
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)

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

Paul Catledge
2109 SW 10th Ave.
Fort Lauderdale, FL 33315

MGRM

Angelina Lopez Catledge
2109 SW 10th Ave
Fort Lauderdale, FL 33315

(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:



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 Banking and Finance constitutes a third degree felony as provided for in s.817.155, F.S.)

PAUL CATLEDGE

Typed or printed name of signer

FILED
12 FEB 24 PM 12:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)