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# Attn: Tammy Hampton

TO:

**Registration Section** 

## **COVER LETTER**

Division of Corporations	
SUBJECT: Galina Simeonoea	LLC
	ited Liability Company
The enclosed Articles of Organization and fee(s) are	e submitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Mike Mullins, EA	
	Name of Person
Mullins & Associates	,
	Firm/Company
220 Cheney Highway	
	Address
Titusville Florida; 32780	
	ity/State and Zip Code
MMikeMullins@cfl.rr.com	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	se call:
Mike Mullins, EA	at ( 321 ) 383-9050
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \$130.00 Filing Fee & Certificate of Status .	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address

#### 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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

12 APR 24 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 6, 2012

MULLINS & ASSOCIATES MIKE MULLINS EA 220 CHENEY HWY TITUSVILLE, FL 32780

SUBJECT: GALINA, LLC Ref. Number: W12000012938

We have received your document for GALINA, 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):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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.

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." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

Please return the corrected original and one copy of 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) 245-6051.

Tammy Hampton

Regulatory Specialist II Registration/Qualification Section

Letter Number: 812A00008602

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name:		
The name of the Limited Liability Com	pany is:	
Galina Simeonoea LLC		
(Must end with the words "Lin	nited 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:	Mailing Address:	
1050 Clearlake Road Suite 8	220 Cheney Highway	
Cocoa, Florida 32922	Titusville, Florida 32780	
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another	
The name and the Florida street address	s of the registered agent are:	
Mike Mullins, EA	4	

WIERG WIGH	IIII 0, L.A
	Name
220 Ch	eney Highway
	Florida street address (P.O. Box NOT acceptable)
Titusville	<sub>FL</sub> 32780
	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)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Konstantinos Manolakakis
	2460 US HWY 1
	Mims, FL 32754
MGRM	Galina Simeonea
	2460 US HWY 1
	Mims, FL 32754
	-
(Use attachment if necessary)	
CLEV. Effective data if athenthe	on the data of Cities and CONTIONIALLY
effective date is listed, the date ma	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days p
90 days after the date of filing.)	ast be specific and cannot be more than five business days p
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REQUIRED SIGNATURE:	(X)
1/00	
4	

(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.)

#### Konstantinos Manolakakis

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)