

L12000061905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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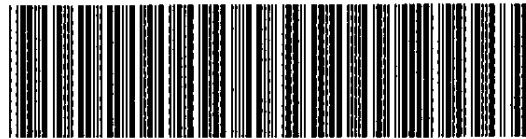
(Business Entity Name)

(Document Number)

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2012 MAY -4 PM 2:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W12-21224

J. BRYAN

MAY - 8 2012

EXAMINER

## COVER LETTER

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

SUBJECT: Home To Home Staging 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:

Scott Clines

Name of Person

The Law Offices of Scott Clines

Firm/Company

5922 Browder Road

Address

Tampa, Florida 33625

City/State and Zip Code

sclines16@gmail.com

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

For further information concerning this matter, please call:

Scott Clines

Name of Person

at ( 813 ) 361-2292

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 17, 2012

SCOTT CLINES  
THE LAW OFFICES OF SCOTT CLINES  
5922 BROWDER ROAD  
TAMPA, FL 33625

SUBJECT: HOME TO HOME STAGING LLC  
Ref. Number: W12000021224

FILED  
2012 MAY -4 PM 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for HOME TO HOME STAGING 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.

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) 245-6051.

Joey Bryan  
Regulatory Specialist II

Letter Number: 812A00011975

The Law Offices of Scott Clines,  
P.A.

12651 N Dale Mabry Hwy #273905  
Tampa, Florida 33688  
813.361.2292  
scottclines@clineslaw.com  
www.clineslaw.com

April 30, 2012

Joey Bryan  
Regulatory Specialist  
Dept. of State, Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

FILED  
2012 MAY -4 PM 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Mr. Bryan:

Enclosed please find a copy of your letter dated April 17, 2012, and a completed Articles of Organization for the creation of Home To Home Staging LLC, complete with the registered agent's handwritten signature. If you have any questions or I need to take additional steps necessary to finish the registration for this LLC, please don't hesitate to contact me at your earliest convenience.

Thank you, and have a great day.

Sincerely,

  
Scott Clines, Esq.

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Home To Home Staging 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:

908 St. Andrews Cove  
Niceville, Florida 32578

### Mailing Address:

908 St. Andrews Cove  
Niceville, Florida 32578

## 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:

Northwest Registered Agent LLC.

Name

3111 W. Dr. MLK Blvd., STE 100-B180

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

Tampa

FL 33607

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)

Dan Keen - Manager

(CONTINUED)

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TALLAHASSEE, FLORIDA

**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

Wendy Clines  
908 St. Andrews Cove  
Niceville, Florida 32578

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(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.)

Wendy Clines

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)**