

L120000132149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

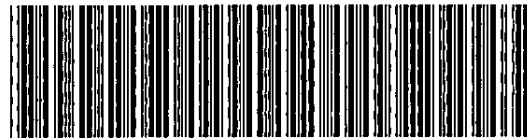
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

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Special Instructions to Filing Officer:



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09/24/12--01039--017 \*\*125.00

EFFECTIVE DATE  
EFFECTIVE DATE

9/19/2012

FILED  
12 SEP 21, PM 1:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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B. KOHR

OCT 17 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 25, 2012

VANESKA GONZALEZ  
10402 2ND WAY NORTH, APT. E  
ST. PETERSBURG, FL 33716

SUBJECT: VANESKA'S DESING  
Ref. Number: W12000049391

EFFECTIVE DATE 9/9/2012

FILED  
12 SEP 24 PM 1:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for VANESKA'S DESING 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 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." Please amend your document accordingly.

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.

Buck Kohr  
Regulatory Specialist II

Letter Number: 012A00023992

EFFECTIVE DATE

9/19/2012

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

"Vanessa's Desing" L.L.C.  
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:

Vanessa Gonzalez

Name of Person

N/A

Firm/Company

10402 2nd Way N Apt E

Address

Saint Petersburg FL, 33716

City/State and Zip Code

arieta.vanessa@yahoo.com

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

For further information concerning this matter, please call:

Vanessa Gonzalez at (727) 277-2988

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

EFFECTIVE DATE

9/19/2012

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

"Vaneska's Design" L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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FLORIDA  
SECRETARY OF STATE

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

10402 2nd Way N Apt F  
Saint Petersburg  
FL 33716

The same

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:

Vaneska Gonzalez

Name

10402 2nd Way N Apt F  
Florida street address (P.O. Box NOT acceptable)  
Saint Petersburg FL 33716  
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.

Vaneska  
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:**

Manager

Vaneska Gonzalez  
10402 2nd Way N Apt E  
Saint Petersburg FL 33716

N/A

N/A

N/A

N/A

N/A

N/A

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 09/19/2012. (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:**

Vaneska

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.)

Vaneska Gonzalez

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)