

L12000156865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

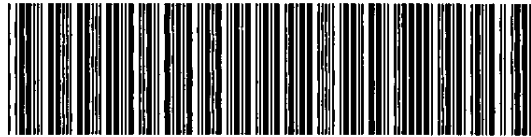
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan DEC 17 2012

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ALL About Kids Consignment Sale, 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:

Pamala Hanson
Name of Person

ALL About Kids Consignment Sale, LLC.
Firm/Company

510 Seacrest Ave
Address

Merritt Island, FL 32952
City/State and Zip Code

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

For further information concerning this matter, please call:

Pamala Hanson at (321) 452-6547
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



All ABOUT KIDS

Consignment Sale

December 6, 2012

I Kimberley Vitaliano and Douglas Vitaliano would like to dissolve our All About Kids Consignment Sale LLC business document number L11000086913. We are selling our business, All About Kids Consignment Sale, along with the business name to Gia Payne and Pamala Hanson.

Thank you,

Kimberley Vitaliano

Douglas Vitaliano

Phone: 321-728-3469 Douglas and Kimberley Vitaliano

Return address: 3477 Treadwell Lane
Malabar, FL 32950

Please forward mail or documentation to above address.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

All About Kids Consignment Sale, 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:

476 Kenwood Ave
Merritt Island, FL 32952

Mailing Address:

510 Seacrest Ave
Merritt Island, FL
32952

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:

Pamala Hanson
Name

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

Merritt Island FL 32952
City, State, and Zip

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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..

Pamala Hanson
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:

MGR

Pamala Hanson
510 Seacrest Ave
MERRITT Island, FL 32952

MGR

Gia Hanson Payne
4716 Kenwood Ave
MERRITT Island, FL 32952

(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:

Pamala Hanson

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.)

Pamala Hanson

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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