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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	
JAN 14	2013	
L. SELL	ERS	
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TECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 28, 2012

CYNTHIA ARNETT P.O. BOX 15238 FERNANDINA BEACH, FL 32035

SUBJECT: ACCENT HERE L.L.C. Ref. Number: W12000063745

We have received your document for ACCENT HERE L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

One ONE person may serve as registered agent.,

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.

Letter Number: 812A00030553

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

Accent Here PO Box 16237 Fernandina Beach, FL 32035 Phoned: (904) 712-4479 Email: accenthere@gmail.com

January 7, 2013

Attention: Leslie Sellers Regulatory Specialist II Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Accent Here (L.L.C.)
Articles of Organization

Dear Ms. Sellers:

Pursuant to your letter of December 28, 2012, please find enclosed the revised Articles of Organization for Accent Here L.L.C.

As you will note, I have listed one Registered Agent and now have a different address than listed on the previous forms submitted. A check in the amount of \$160.00 was previously provided (1/1/13) for Filing Fee, Certificate of Status & Certified Copy.

If you have questions or need further information, please contact me.

Thank you for your assistance and attention to this matter.

Sincerely,

X -----

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(850) 245-6051.

, J

	COVER LETTER	
,	TO: Registration Section Division of Corporations	
	SUBJECT: A CCENT HERE 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:	
	Cynthia Arnett Name of Person	
	Name of Person Accent Here L.L.C. Firm/Company	
	POBOX 16237 Address	
	Ferrandina Beach FL 32035 City/State and Zip Code accenthered gmail, Lom E-mail address: (to be used for future annual report notification)	
	E-mail address: (to be used for future annual report notification)	_
	For further information concerning this matter, please call:	
(With Arrett at (904) 712 - 4479 Name of Person Area Code & Daytime Telephone Number	
(Enclosed is a check for the following amount: Check Previously Submitted 2\$125.00 Filing Fee \$130.00 Filing Fee \$155.00 Filing Fee \$160.00 Filing Fee,	5-e attachu

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Certificate of Status

Street/Courier Address

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status &

(additional copy is enclosed)

Certified Copy

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is	:
Accent Here L.L.C. (Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
96040 Hickory Place Fernandina Brack, Fl 32034	PO Box 16237 Fernandina Beach, FL 32035
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Cynthia Ar	nett
5	
96040 Hickory	Pace Idress (P.O. Box <u>NOT</u> acceptable)
Fernandina Beach City, S	tate, and Zip
liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and comple	accept service of process for the above stated limited this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of the performance of my duties, and I am familiar with egistered agent as provided for in Chapter 608, F.S
Cyttin C	met -
(Registered Agent's Signa	ature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Fitle:</u> "MGR" = Manager	Name and Address:
MGRM" = Managing Member	Cynthia Arnett 96040 Hickory Place Fernandina Brack FL 32031
MGR	Mary Maguire 203 Ceder Street Fernandura Beach Fl 32034
Use attachment if necessary)	

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

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)