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(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:
· ·
MAR 27 2013
A. LUNT
W13-5693
WIS JEE

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01/25/13--01035--029 **160.00

2013 May 25 By 2 56
SECRETARY OF STATE
ALLAHASSEE, FLORES



January 29, 2013

DANNY JOE WATLE5R 1001 91 ST #509 BAY HARBOR, FL 33154

SUBJECT: HERMETIC STREET Ref. Number: W13000005693

We have received your document for HERMETIC STREET and your check(s) totaling \$160.00. 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) 245-6094.

Letter Number: 313A00002247

Agnes Lunt Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: LE	Name of Limite	CC d Liability Company		
The enclosed Articles of	Organization and fee(s) are s	submitted for filing.		
Please return all correspo	ondence concerning this matte	er to the following:		
DANN	4 JOE WAS	CLEN		
HERN	etic stee	Name of Person	TALL'A	2013 K A
1001 91	st \$509	Firm/Company Address	TARY OF	23
bay har	bon Fl 3	3 154 //State and Zip Code	FLORIBA	¥ 256
dar	ing wather 104	Owo Comport notification)	· · · · · · · · · · · · · · · · · · ·	-
For further information c	oncerning this matter, please	call:		
Danny Joe W	VAX\EN	at (305) 318 7	2636 ohone 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 C Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(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:	<u>Mailing Address:</u>	7	~
1001 91 51 ASO9	1001 9158	# 509	= TO
bay harbor FZ 33154	bay hurbon f	1 33154 E	3 = E
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Ag Registered Agent. You must designate an	ent's Signature	
The name and the Florida street address of	the registered agent are:	D	
DANNY Ja	= WATLER		•

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

Bay Harbon FL FL 33154

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..

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MAR	DANN JOE WATLERS 1001 9151 # 509 500 1001 9151 # 509 500 1001
mgkm	Lynette Desourdy 943 Seinndale (Rt Palm Speings, Fl 33461
·	
	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days p
REQUIRED SIGNATURE:	

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)