

L13000057185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

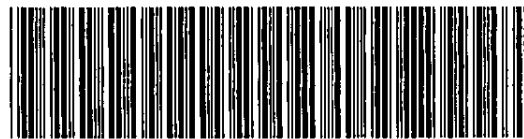
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W13-18333

Office Use Only



700246182367

03/28/13--01010--011 **125.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

APR 18 2013

EXAMINER

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Palm Wave Realty, 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:

Danielle Griffore

Name of Person

Firm/Company

PO Box 151587

Address

Tampa, Fl. 33684

City/State and Zip Code

palmwavekd@aol.com

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

For further information concerning this matter, please call:

Danielle Griffore

Name of Person

at **813 374-8474**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Palm Wave Realty, 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:

1701 Lakeside Avenue, Unit #7

St Augustine, Fl. 32084

Mailing Address:

PO Box 151587

Tampa, Fl. 33684

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:

John W Horan

Name

1701 Lakeside Avenue, Unit #7

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

St Augustine, Fl. 32084

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)

(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

John W Horan

1701 Lakeside Avenue, Unit #7

St Augustine, Fl. 32084

(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. 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.)

John W Horan

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)

John W Horan
PO Box 151587
Tampa, Fl. 33684

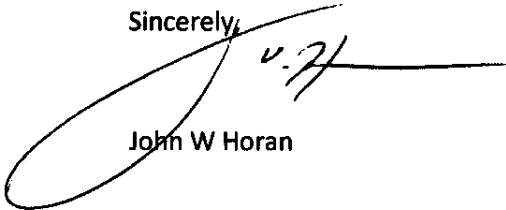
April 15, 2013

Re: Reference Number W13000018333

Ms. Bostick,

I recently had my associate file Articles of Organization for a Florida Limited Liability Company. I received a letter back stating that the Articles had not been filed because there is a conflict with document number P01000005026. This document number is associated with Palm Wave Realty, Inc which I am the registered agent for. My plans are to dissolve Palm Wave Realty, Inc once I have the LLC established. Please let me know if there is anything else you need in order to process our request of establishing Palm Wave Realty, LLC. I appreciate your assistance.

Sincerely,

A handwritten signature in dark ink, appearing to be 'J. Horan', written over a large, loopy flourish.

John W Horan

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TALLAHASSEE, FLORIDA

* my phone number 813-374-8474

contact LLC Department 850-245-6051



120 day waiting period
once I dissolve Palm Wave Realty
Inc.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 29, 2013

DANIELLE GRIFFORE
POST OFFICE BOX 151587
TAMPA, FL 33684

4/15/13 spoke to Barbara file the
letter that I will be dissolving Inc.

SUBJECT: PALM WAVE REALTY, LLC
Ref. Number: W13000018333

We have received your document for PALM WAVE REALTY, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P01000005026,

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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 413A00007465

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TALLAHASSEE, FLORIDA

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