

43000062428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

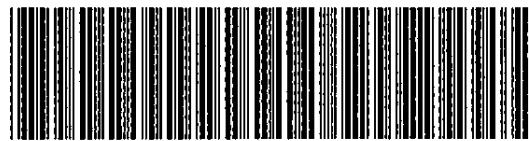
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W13-23410

Office Use Only



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04/19/13--01029--003 \*\*160.00

2013 APR 26 PM 5:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

B. BOSTICK  
APR 29 2013  
EXAMINER

(850) 245-6051.

**COVER LETTER**

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: On The Market, LLC — On The Market  
 Name of Limited Liability Company  
Boutique, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lindsay Lambert

Name of Person

On The Market, LLC — On The Market Boutique, LLC

Firm/Company

8539 Gate Parkway West, Unit 9231

Address

Jacksonville, FL 32216

City/State and Zip Code

OnTheMarketLLC@yahoo.com

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

For further information concerning this matter, please call:

Lindsay Lambert

at (904) 716-8995

Name of Person

Area Code & Daytime Telephone Number

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 TALLAHASSEE, FLORIDA

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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)

Check already

Processed

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

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

On The Market, LLC On The Market Boutique, 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:**

8539 Gate Parkway West, Unit 9231  
Jacksonville, FL 32216

**Mailing Address:**

8539 Gate Parkway West, Unit 9231  
Jacksonville, FL 32216

**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:

Lindsay Lambert

Name

8539 Gate Parkway West, Unit 9231

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

Jacksonville, FL 32216

FL

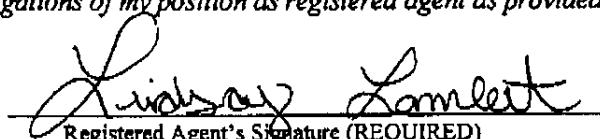
City, State, and Zip

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TALLAHASSEE, FLORIDA

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2013 APR 26 PM 5:19

*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..*

  
Lindsay Lambert

Registered Agent's Signature (REQUIRED)

**(CONTINUED)**





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 22, 2013

LINDSEY LAMBERT  
8539 GATE PARKWAY WEST  
UNIT 9231  
JACKSONVILLE, FL 32216

SUBJECT: ON THE MARKET, LLC  
Ref. Number: W13000023410

2013 APR 26 PM 5:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

We have received your document for ON THE MARKET, LLC 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 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 K23439,

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: 613A00009600