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(Red	questor's Name)	
(Add	dress)	-
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PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

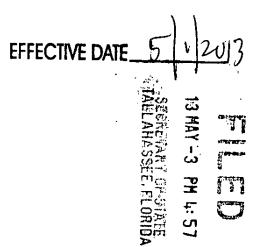
Office Use Only

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FLORIDA DEPARTMENT OF STATE Division of Corporations

EFFECTIVE DATE 5 1/2/013

May 7, 2013

ELENA POMPEI 13510 83RD STREET FELLSMERE, FL 32948

SUBJECT: LUCKY DUCK LLC Ref. Number: W13000026776

We have received your document for LUCKY DUCK 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 existing entity with a similar name is LUCKY DUCKS, LLC -- Doc. Number L08000046934.

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.

Buck Kohr Regulatory Specialist II

Letter Number: 813A00011080

(850) 245-6051.

COVER LETTER

TO:	Registration : Division of C			SUFFIN	vg TC)AD	220
SUBJE	CCT:	LUCKY DI Name of Lin	mited Liability Company		—— · · · · · · · · · · · · · · · · · ·		· •
The end	closed Articles of	of Organization and fee(s) a	re submitted for filing.		H	13 W	17
Please 1	return all corresp	pondence concerning this m	natter to the following:			3	0
		ELENA	POMPEI			6.5 90 E.S	,
·			Name of Person	EFFECTIVE D	ATE 5	2.013	
-	1351	0 8378	Firm/Company				
-			Address				
_	FElls	THERE, FL EI BEACH &	32948				
	Pamp	FIRENCIA O	City/State and Zip Code		_		
-	1 0111		ed for future annual report notifi	cation)			
For furt	her information	concerning this matter, plea		,			
,		,		00 175.			
Ell	ENA P	orpei	$\underline{\qquad}$ at $(\underbrace{POH}_{\text{Area Code & Dayti}} \underbrace{2(}_{\text{Code & Dayti}})$	10-675	<u>5</u>		
	Name	of Person	Area Code & Dayti	me Telephone Number			
Enclose	ed is a check for	or the following amount:					
□\$ 125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status		Certificate (Certified C	of Status &		
		Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street/Courier A Registration Section Section of Corp Clifton Building 2661 Executive C Tallahassee, FL	on orations Center Circle			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Lightlity Company is:
LUCKY DUCK IIC SUNTING TOAD 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: Mailing Address:
13510 83 mg. 13510 83 mg.
FFIISMENT FL. 32948 FFIISTURE PL. 32948
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: EFFECTIVE DATE 5 1 2013
ELENA POMPEI
1351083 rd 8T.
Florida street address (P.O. Box NOT acceptable) FELISTERE FL 32948
City, State, and Zip
Having been named as registered agent and to accept service of process for the above stated limited

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)

Page 1 of 2

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" = Managing Member MGRM" = Managing Member	ELENA POMPEI 13510 83 d f. FELLATIONE FL. 32948
	
(Use attachment if necessary)	
	- 1 1
CLE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.)	date of filing: $\frac{5}{1/13}$. (OPTIOI be specific and cannot be more than five busi

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.)
ELENA POMPEN

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)