

✓
L13000124214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

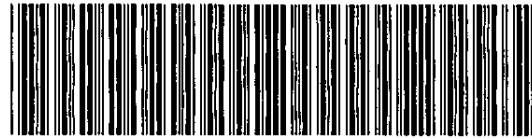
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100251243881

08/30/13--01012--010 **155.00

EFFECTIVE DATE 8-30-13

FILED
2013 AUG 30 PM 4:51
CLERK OF COURT
TALLAHASSEE, FLORIDA

B. BOSTICK

SEP 03 2013

EXAMINER

(850) 245-6051.

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **Sweet & Co., 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:

Erin Mottayaw

Name of Person

Sweet & Co., LLC

Firm/Company

2957 Willowleaf Lane

Address

Wesley Chapel, FL 33544

City/State and Zip Code

erin.mottayaw@gmail.com

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

For further information concerning this matter, please call:

Erin Mottayaw

Name of Person

at **(616) 218-6824**

Area Code & Daytime Telephone 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 Circle
Tallahassee, FL 32301

2003 AUG 30 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sweet & Co., 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:

2957 Willowleaf Lane

Wesley Chapel, FL 33544

Mailing Address:

2957 Willowleaf Lane

Wesley Chapel, FL 33544

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:

Erin Mottayaw

Name

3957 Willowleaf Lane

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

Wesley Chapel, FL 33544 FL

City, State, and Zip

2013 AUG 30 PM 4:51
TALLAHASSEE, FL 32309

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..

Erin Mottayaw

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Erin Mottayaw

3957 Willowleaf Lane

Wesley Chapel, FL 33544

MGRM

Sherry Styers

2449 Kenchester Loop

Wesley Chapel, FL 33543

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: August 30, 2013. (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:

Erin Mottayaw

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.)

Erin Mottayaw

Typed or printed name of signee

2013 AUG 30 PM 4:51
TALLAHASSEE
FLORIDA

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)