L13000147780

(Re	equestor's Name)	•
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bı	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400252708244

400252708244 10/18/13--01016--009 **130.00

SECKE WAY OF LIFE

113 OCT 18 PH 12:

B. BOSTICK 0CT 2 1 2013

EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

Soul Stone Music

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:	
Jeffery G Whitfield	
Name of Person	
Firm/Company	
31201 Lochmore Circle	
Address	
Sorrento FL 32776	
City/State and Zip Code	
jgw1975.jw@gmail.com	
E-mail address: (to be used for future annual report notification)	A. 20
For further information concerning this matter, please call:	ZIII OCT 18
leffers C Whitfield 206 400 0240	3
Jeffery G Whitfield 386 490-0340	<u> </u>
Name of Person Area Code & Daytime Telephone Number	· 트일 그
	[0] N
Enclosed is a check for the following amount:	PHI2: 15
□\$125.00 Filing Fee	

Mailing Address

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street/Courier Address

Certified Copy

(additional copy is enclosed)

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certificate of Status & Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	imited Liability Company				
Soul Stone Music, LLC.					
(M	ust end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Ac	ldress:				
The mailing addre	ss and street address of the	principal office of the Limited Li	iability Co	mpany	is:
Principal Office A	Address:	Mailing Address:			
31201 lochmore circle		31201 Lochmore cCircle			
Sorrento Fl 32776		Sorrento FL 32776			
					
business entity with an	ompany cannot serve as its own Re active Florida registration.) Florida street address of th	gistered Agent. You must designate an indiv e registered agent are:	idual or anoti	her	
business entity with an	active Florida registration.) Florida street address of th Jeffery G Whitfield	e registered agent are:	idual or anoth	201	
business entity with an	active Florida registration.) Florida street address of th	e registered agent are:	idual or anoth	2013 OC	,,,
business entity with an	active Florida registration.) Florida street address of th Jeffery G Whitfield Nat 31201 Lochmore Circle	e registered agent are:	TALLAHAS	2013 OCT 1	\$
business entity with an	active Florida registration.) Florida street address of th Jeffery G Whitfield Nat 31201 Lochmore Circle Florida street	e registered agent are: me address (P.O. Box <u>NOT</u> acceptable)	ALLAHASSE	2013 OCT 18	
business entity with an	active Florida registration.) Florida street address of th Jeffery G Whitfield Nat 31201 Lochmore Circle Florida street Sorrento	e registered agent are: me address (P.O. Box NOT acceptable) FL 32776	ELECTION OF TALLAHASSES, TO	2013 OCT 18	; ; ;
business entity with an	active Florida registration.) Florida street address of th Jeffery G Whitfield Nat 31201 Lochmore Circle Florida street Sorrento	e registered agent are: me address (P.O. Box NOT acceptable)	ELCEL WAY OF JOY OF JOY	2013 OCT 18 PM 12:	j - 9

(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:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGRM	Jeffery G Whitfield	
	31201 Lochmore Circle	
	Sorrento FL 32776	
MGRM	Judy A Bevirt	
	32045 Dewberry Lane	
	Sorrento FL 32776	
		
(Use attachment if necessary)		
	an the date of filing: (OPTIONAL)	
	must be specific and cannot be more than five business days	
prior to or 90 days after the date of filin	ALLAHA	
	2 -	<u> </u>
REQUIRED SIGNATURE:	₩ — — — — — — — — — — — — — — — — — — —	
- 1 - 7 - 1	SE B	***
1 <i>[] [</i>	S. William S. E.	, .
		-
Signature of a m		
constitutes an affirmation I am aware that any false	on 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)	
_	G. Whit field	
•	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)