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(Reque	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Busin	ess Entity Nar	me)
(Docum	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	

Office Use Only



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Effective Date 1111

SECRETARY OF STATE TALLAHASSEE.FLORIDA

2013 DEC 23 AM 8: 4

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JAN 1 4 2013 T. **HAMPTON** 

## COVER LETTER

TO: Registration Section **Division of Corporations** SOUTHERN INVESTMENT COMPANY, LLC SUBJECT: 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: JUAN CARLOS ONA SOUTHERN INVESTMENT COMPANY, LLC Firm/Company 7995 SAW PALMETTO LANE Address **BOYNTON BEACH, FLORIDA 33436** City/State and Zip Code SOUTHERNITCA@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JUAN CARLOS ONA Name of Person Enclosed is a check for the following amount:

### Mailing Address

**□**\$125.00 Filing Fee

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

□\$130.00 Filing Fee &

Certificate of Status

### Street/Courier Address

■\$155.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

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

□ \$160.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)



# FLORIDA DEPARTMENT OF STATE Division of Corporations

#### RECEIVED

14 JAN 13 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

December 27, 2013

JUAN CARLOS ONA 7995 SAW PALMETTO LN BOYNTON BEACH, FL 33436

SUBJECT: SOUTHERN INVESTMENT COMPANY, LLC

Ref. Number: W13000070108

We have received your document for SOUTHERN INVESTMENT COMPANY, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is: SOUTHERN INVESTMENTS, LLC, document number L04000079510.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Tammy Hampton Regulatory Specialist III

Letter Number: 613A00029178

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limite	d Liability Company i	s:
	HOME FREE REA	
(Must end	with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Addres The mailing address and		principal office of the Limited Liability Company
Principal Office Addre	ess:	Mailing Address:
7995 SAW PALMETTO LANG	Ē	7995 SAW PALMETTO LANE
BOYNTON BEACH, FLORIDA	A 33436	BOYNTON BEACH, FLORIDA 33436
ARTICLE III - Regist	ered Agent, Register	ed Office, & Registered Agent's Signature:
(The Limited Liability Compan business entity with an active	y cannot serve as its own Reg Florida registration.)	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
(The Limited Liability Compan business entity with an active	y cannot serve as its own Reg Florida registration.)	e registered agent are:
(The Limited Liability Compan business entity with an active	y cannot serve as its own Reg Florida registration.) da street address of the	gistered Agent. You must designate an individual or another e registered agent are:
(The Limited Liability Compan business entity with an active	y cannot serve as its own Reg Florida registration.) da street address of the JUAN CARI Nan	gistered Agent. You must designate an individual or another e registered agent are:
(The Limited Liability Compan business entity with an active	y cannot serve as its own Reg Florida registration.) da street address of the JUAN CAR Nan 7995 SAW PAI	e registered agent are:
(The Limited Liability Companbusiness entity with an active) The name and the Florid	y cannot serve as its own Reg Florida registration.) da street address of the JUAN CAR Nan 7995 SAW PAI	e registered agent are:  LOS ONA  The control of th

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

2013 DEC 23 AH 8: 40
SECRETARY OF STATE
AHASSEE, FLORIDA

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Memb	per
MGRM	JUAN CARLOS ONA
	7995 SAW PALMETTO LANE
	BOYNTON BEACH, FLORIDA 33436
	<u></u>
(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·
	than the date of filing:
	ming.)
or 90 days after the date of	
or 90 days after the date of	
or 90 days after the date of t	

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)

JUAN CARLOS ONA Typed or printed name of signee