

L14000017736

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

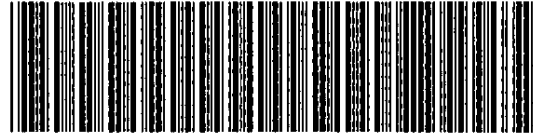
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB -3 2013

T. HAMPTON

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Serenity At Airoso, 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:

Phyllis Bradshaw  
Name of Person

7548 154<sup>th</sup> Ct. North  
Firm/Company  
Address

Palm Beach Gardens, FL 33418  
City/State and Zip Code

Garphyl37 @ AOL.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Phyllis Bradshaw at ( 561 ) 236 6823  
Name of Person 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

Phyllis Bradshaw  
7548 154<sup>th</sup> Court North  
Palm Beach Gardens, FL 33418  
561 236 6823 (Phone)  
561 575 6699 (Fax)

January 22<sup>nd</sup>, 2014

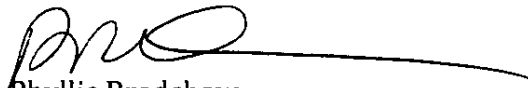
To Whom It May Concern:

Dear Sir/Madam:

Please find enclosed, application to form a Florida Limited Liability Company along with a check for \$130.00 for filing fee and Certificate of Status.

Please feel free to contact me if you have any questions.

Respectfully,

  
Phyllis Bradshaw.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Serenity at Airoso, 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:**

177 N.E. Airoso Blvd.  
Port St. Lucie  
Florida, 34983

**Mailing Address:**

7548 154<sup>th</sup> Ct. N.  
Palm Beach Gardens  
Florida, 33418


**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:

Phyllis Bradshaw  
Name  
7548 154<sup>th</sup> Ct. North  
Florida street address (P.O. Box **NOT** acceptable)  
Palm Bch. Gardens FL 33418  
City Zip

*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 605, F.S..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Phyllis Bradshaw  
7548 154 Th Ct. N.  
Palm Beach Gardens Fl. 33418


(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member.**

(In accordance with section 605.0203 (1) (b), 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.)

Phyllis Bradshaw

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)

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