

L14000038133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

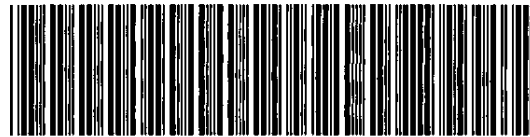
(Document Number)

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

Special Instructions to Filing Officer:

W14-10798

Office Use Only



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02/18/14--01041--015 \*\*125.00

EFFECTIVE DATE 3-10-14

2014 MAR -3 P 10:10  
RECEIVED  
CLERK OF COURT  
CLERK OF COURT

B. POSTICK

MAR -6 2014

CLERK

**Dancesport Etc LLC  
6279 Briarwood Terrace  
Fort Myers, FL 33912  
239-357-6903**

January 31, 2014

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Dancesport Etc LLC  
EIN: 30-0718712  
L11000019041

Dear Ladies and Gentlemen,

This letter is to inform you that we are releasing the name Dancesport Etc LLC and we have no intention of reinstating as a new limited liability company.

We respectfully request that you update your records accordingly. If further information is required please contact me at 239-357-6903.

We are making application as a new corporation in the State of Florida. Please see the enclosed application along with the appropriate filing fee.

Sincerely,



Karen S Debitetto  
Manager

Enclosures

2014 FEB 3 PM 4:00  
FILED

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Dancesport Etc 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:

Michele M. Hoover

Name of Person

Firm/Company

6361 Presidential Court, Suite A

Address

Fort Myers, FL 33919

City/State and Zip Code

mhoover@alexanderhoovercpas.com

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

For further information concerning this matter, please call:

Michele M Hoover

Name of Person

at ( 239 ) 481-4114

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

FILED  
2014 JUN -3 PM 10  
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Dancesport Etc 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:**

6279 Briarwood Terrace

Fort Myers, FL 33912

6279 Briarwood Terrace

Fort Myers, FL 33912

**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:

Michele M Hoover

Name

6361 Presidential Court, Suite A

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

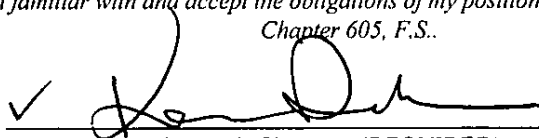
Fort Myers

FL 33919

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)

**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:**

Karen S Debitetto

6279 Briarwood Terrace


Fort Myers, FL 33912

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 3/10/14 (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.)

Karen S Debitetto

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)**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 19, 2014

MICHELE M. HOOVER  
6361 PRESIDENTIAL COURT  
SUITE A  
FT. MYERS, FL 33919

SUBJECT: DANCESPORT ETC LLC  
Ref. Number: W14000010798

FILED  
2014 FEB -3 P 4:10  
TALLAHASSEE, FL  
DIVISION OF CORPORATIONS

We have received your document for DANCESPORT ETC LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 18, 2014. Please amend your document accordingly.

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.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 414A00003710