

L14 000067097

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

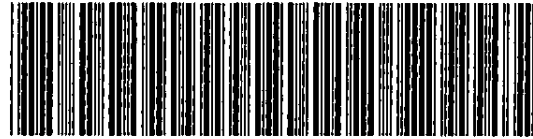
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300258845423

04/11/14--01032--018 **130.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 APR 21 PM 3:24

FILED

APR 24 2014

T CLINE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 14, 2014

DARREN APEL
1015 NW 17TH AVE
DELRAY BEACH, FL 33445

SUBJECT: FREDRICK MARTIN, LLC.
Ref. Number: W14000023480

We have received your document for FREDRICK MARTIN, LLC. and your check(s) totaling \$130.00. 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 April 11, 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.

Tammi Cline
Regulatory Specialist II

Letter Number: 314A00007947

2014 APR 21 PM 3:24
SECRETARY OF STATE
MAIL CLASSIFICATION FLORIDA

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Fredrick Martin
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:

Darren Apel

Name of Person

Fashion Concepts

Firm/Company

1015 NW 17th Ave

Address

Delray Beach, FL 33445

City/State and Zip Code

sales@fredrickmartin.com

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

For further information concerning this matter, please call:

Darren Apel

at

561

Area Code

8242400

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 APR 21 PM 3:24

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Fredrick Martin, 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:

c/o Fashion Concepts

1015 NW 17th Ave

Delray Beach, Fl 33445

c/o Fashion Concepts

1015 NW 17th Ave

Delray Beach, Fl 33445

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:

Darren Apel

Name

1015 NW 17th Ave

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

Delray Beach,

FL 33445

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.

DA AGENT FOR FREDRICK MARTIN

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
JUN 21 PM 3:24
CLERK OF STATE
TREASURY
TALLAHASSEE, FLORIDA

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 /MEMBER AMBR

Name and Address:

Dora Giyim aksesuarları ve Tekstil San. Tic. Ltd. Sti.

Turgut Reis Mah. Barbaros, Caddesi Tekstilkent A13 Blok

No:62 Sanayi Eserler 02200

MURAT SAĞLAM

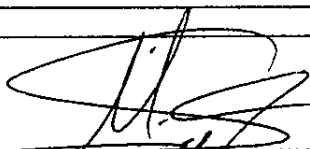
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 4/30/14 4/30/14 (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.)

MURAT SAĞLAM

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)

2014 APR 21 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED