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(F	Requestor's Name)	
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(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
([Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	to Filing Officer:	
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Shortlying of Simile

MAY - 9 2014 T. BROWN

1111-701-KD

COVER LETTER

Division of Corporations	·	
SUBJECT: LU Big Much Enterprises LLC. Name of Limit	ed Liability Company	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Gerald T Redding	Name of Person	
	Firm/Company	
877 Lullwater drive	Address	
Oviedo, FL 32765 City	/State and Zip Code	
jerryredding@att.net E-mail address: (to be used f	or future annual report matific	ation)
For further information concerning this matter, please	call:	
Jerry Redding at (40) Name of Person		tephone Number
Enclosed is a check for the following amount:		
Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	2 \$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailine Address	Street/Courier Add	TESS.

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

TO:

Registration Section

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



May 5, 2014

GERALD T REDDING 877 LULLWATER DR OVIEDO, FL 32765

SUBJECT: LU BIG MUCH ENTERPRISES

Ref. Number: W14000028146

We have received your document for LU BIG MUCH ENTERPRISES and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. 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.

Teresa Brown Regulatory Specialist II

Letter Number: 514A00009498

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

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ARTICLE I - Name			~
	ited Liability Company i	s:	۰۰و
			30 E M
LU Big Much Enter	mriana IIC		The state of the s
TO DIO MOCH ERIES	Must end with the word	ls "Limited Liability Company, "I.L.C.," or "LLC.")	- 6 A
	(and the state of t	19 10 10 10 10 10 10 10 10 10 10 10 10 10
ARTICLE II - Addr			The ty
i ne mining address a	ind street address of the	principal office of the Limited Liability Company is:	200
Principal Office Add	ires:	Mailing Address:	THE PROPERTY OF THE PARTY OF TH
877 Lullwater dr Ov	riedo, FL 32765		7
-			<u>u</u>
			
		ed Office, & Registered Agent's Signature:	
		as its own Registered Agent. You must designate an it	idividual or
anomer dusiness enm	ty with an active Florida	registration,)	
The name and the Flor	rida street address of the	registered agent me:	
	Gerald T Redding		
·	Seldia 1 Izandilia	Name	
	877 Lullwater dr		
		s (P.O. Box NOT acceptable)	
		, , ,	
	Oviedo City	FL 32765 Zip	
	City	Zф	
		accept service of process for the above stated limited b	
		reby accept the appointment as registered agent and ag provisions of all statutes relating to the proper and com	
		provisions of all statutes retailing to the proper and comp cept the obligations of my position as registered ogent a	
	•	Chapter 605, F.S.	* -
		1 famous pro-	
	Ger	rald TRedding	
	Registered Age	ent's Signature (REOUIRED)	

(CONTINUED)
Page 1 of 2

<u>Citle:</u>	Name and Address:
AMBR" = Authorized Member	er en
MGR" = Manager	
•	
Use attachment if necessary) V: Effective date, if other than	n the date of filing: (OPTIONAL)
V: Effective date, if other tha	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior to or 5
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V: Effective date, if other that entire date is listed, the date in filing.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signatur (In accordance with seconds)	Cerald T Reading e of a member or an authorized representative of a member, section 605.0203 (1) (b), Florida Statutes, the execution of this document
V: Effective date, if other that the date is listed, the date in filing.) VI: Other provisions, if any. REQUIRED SIGNATURE: Signatur (In accordance with some constitutes an affirmation of the date in the	Cerald T Reading e of a member or an authorized representative of a member, section 605.0203 (1) (b), Florida Statutes, the execution of this document ation under the penalties of perjury that the facts stated herein are true.
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