

L14000078428

(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:

W14-26151

Office Use Only



900258978609

04/22/14--01008--025 **160.00

2014 MAY 14 PM 4:01

B. BOSTICK

MAY 14 2014

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Limitless Investments
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:

Desi Daniels

Name of Person

Limitless Investments

Firm/Company

20567 NW 14th Avenue

Address

Miami Gardens, FL 33169

City/State and Zip Code

limitlessinvestingllc@gmail.com

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

For further information concerning this matter, please call:

Desi Daniels

Name of Person

at (305)

Area Code

753-8577

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

2014-07-14 PM 00:01

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Limitless Investments Limited Liability Company

(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:

20567 NW 14th Avenue

Miami Gardens FL 33169

20567 NW 14th Avenue

Miami Gardens FL 33169

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:

De'Andre Daniels

Name

20567 NW 14th Avenue

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

Miami Gardens

FL

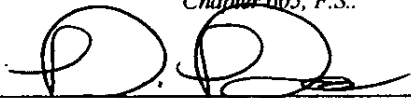
33169

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

Manager

Name and Address:

Desi D. Daniels

20567 NW 14th Avenue

Miami Gardens, FL 33169

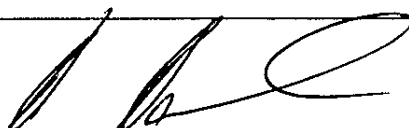
(Use attachment if necessary)

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.)

Desi D. Daniels

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)

2011 JUL 14 PM 4:01



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2014

DESI DANIELS
20567 NW 14TH AVENUE
MIAMI GARDENS, FL 33169

SUBJECT: LIMITLESS INVESTMENTS LIMITED LIABILITY COMPANY
Ref. Number: W14000026151

We have received your document for LIMITLESS INVESTMENTS LIMITED LIABILITY COMPANY 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 document must be signed by a member or an authorized representative of a member.

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: 914A00008829

2014 APR 24 PM 6:01
2014 APR 24 PM 6:01