

L14000105607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

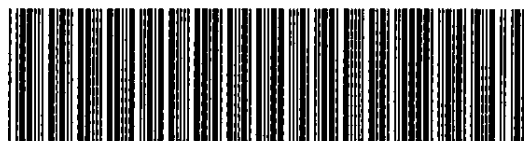
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

incomplete L14-35392

Office Use Only



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05/30/14--01010--027 **160.00

FILED
2014 JUL -1 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALT
EXAMINER
JUL -2 2014



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2014

BETHEL S EUBANKS
11559 NW SUMMERS RD.
BRISTOL, FL 32321

SUBJECT: BETH'S TUPPERWARE
Ref. Number: W14000035392

We have received your document for BETH'S TUPPERWARE 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 submitted is incomplete. Enclosed are articles of organization for your convenience. Please complete this form and return the complete form to our office.,

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 114A00012280

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Beth's Tupperware 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:

Bethel S. Eubanks
Name of Person

Beth's Tupperware LLC
Firm/Company

11559 NW Summers Road
Address

Bristol, Florida 32321
City/State and Zip Code

Beth Eubanks 41 @ AOL.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Beth Eubanks at (850) 570-0235
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Beth's Tupperware 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:

Beth's Tupperware
11559 NW Summers Rd
Bristol, Florida 32321

Mailing Address:

Beth's Tupperware
11559 NW Summers Road
Bristol, Florida 32321

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:

Bethel S Eubanks

Name

11559 NW Summers Road

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

Bristol FL 32321

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.

B Eubanks

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

President

Name and Address:

Bethel S Eubanks
11559 NW Summers Road
Bristol, FL 32321

(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:

Bethel S Eubanks

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.)

Bethel S Eubanks

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)