L1400033453

(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:
WH-49910

Office Use Only



500262287135

08/14/14--01016--008 **125.00

2014 AUG | 4 PH 3: 57

NUG 26 2014 O.BRUCE

COVER LETTER

Division of	n section Corporations				
SUBJECT: <u>SEAC</u>			_		
	Name of Lin	nited Liability Company			
The enclosed Article	s of Organization and fee(s) a	re submitted for filing.			
Please return all corre	espondence concerning this m	natter to the following:			
JENNIF	ER RAMER ROSS				
		Name of Person			
		Firm/Company		_	
044.01	ALCE DE				
<u>814 S L</u>	AKE DR	Address	10000	2014	
		, 200.000			
LANTAN	NA FL 33462			90A	COOL
	C	City/State and Zip Code		#	
JEN@JENNIF	ERRAMER.COM		- <u>5</u>	P T2	
	E-mail address: (to be use	d for future annual report notification)	10H 212	ယ ပာ	Senata V
For further information	on concerning this matter, plea	ase call:	東京	57	
<u>JENNIFER RAMEI</u> Na	R ROSS at (!	561) 502-3000 Area Code Daytime Telephone Number	- er		
Enclosed is a check f	or the following amount:				
☑ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Fi Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	of Status . Copy		
Reş Div P.C	gistration Section gistration of Corporations D. Box 6327 Ilahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building. 2661 Executive Center Circle Tallahassee, FL 32301			

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 14, 2014

JENNIFER RAMER ROSS 814 S LAKE DR LANTANA, FL 33462

SUBJECT: SEACUP LLC Ref. Number: W14000049910

We have received your document for SEACUP 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note 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.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L06000041000.

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.

Deborah Bruce Regulatory Specialist II 2014 AUG 14 PH 3: 57

www.sunbiz.org

Letter Number: 414A00017519

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

· · · · · · · · · · · · · · · · · · ·	
ited Liability Company, "L.L.C.," or	"LLC.")
eal office of the Limited Liability Cor	npany is:
Mailing Address:	
814 S LAKE DR	
LANTANA FL 33462	
ice, & Registered Agent's Signatur own Registered Agent. You must des ration.) ered agent are:	
<u> </u>	
ame	
Box <u>NOT</u> acceptable)	
FL 33462	
Zip	
et service of process for the above state except the appointment as registered agons of all statutes relating to the proper obligations of my position as register thapter 605, F.S. gnature (REQUIRED) NUED)	ent and agree to act in this er and complete performance
	Mailing Address: 814 S LAKE DR LANTANA FL 33462 ice, & Registered Agent's Signature own Registered Agent. You must destation.) breed agent are: Box NOT acceptable) FL 33462 Zip It service of process for the above static accept the appointment as registered agents of all statutes relating to the property obligations of my position as register hapter 605, F.S gnature (REQUIRED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	JENNIFER ELIZABETH RAMER ROSS REVOCABLE TRUST OF MARCH 18, 2008
	814 S LAKE DR. LANTANA FL 33462
· · · · · · · · · · · · · · · · · · ·	
Use attachment if necessary) 2.V: Effective date, if other than the date of filing ctive date is listed, the date must be specific and filing.)	s: 8 11 2014 (OPTIONAL) ad cannot be shore than five business days prior to or 90
VI: Other provisions, if any.	
REQUIRED SIGNATORE:	
(In accordance with section 605.0203 (1) (b). Florida Statutes, the execution of this document
(in accordance with section 605.0203 (constitutes an affirmation under the per	(1) (b), Florida Statutes, the execution of this document uslties of perjury that the facts stated herein are true. ubmitted in a document to the Department of State

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)

Page 2 of 2

