

L14000141395

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

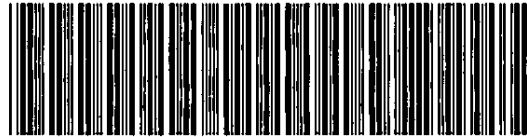
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000263426260

08/22/14--01004--010 **125.00

W14-51944

FILED
14 SEP -9 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 10 2014

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INTERIORS BY MYRIAM L.L.C
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:

MRS. MYRIAM PAYNE
Name of Person

INTERIORS BY MYRIAM, L.L.C
Firm/Company

6750 SW 16th ST.
Address

PLANTATION, FLORIDA 33317
City/State and Zip Code

aaycpa@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angel A. Ylisastigui CPA at (305) 898-4222
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 25, 2014

MYRIAM PAYNE
6750 SW 16TH
PLANTATION, FL 33317

SUBJECT: INTERIORS BY MYRIAM L.L.C.
Ref. Number: W14000051948

We have received your document for INTERIORS BY MYRIAM L.L.C. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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.

Tim Burch
Regulatory Specialist II

Letter Number: 814A00018245

Sept 3, 2014

Florida Dept of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

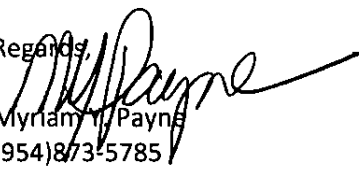
To whom it may concern,

Please see attached letter for the request of INTERIORS BY MYRIAM L.L.C name for my new corporation.

I am the prior owner of INTERIORS BY MYRIAM CORP. located at 844 Sunflower Circle, Weston, FL 33327. I am attesting that I have no intention of reinstating this prior entity and therefore, I authorize the release of the INTERIORS BY MYRIAM CORP entity name.

Please call me at (954)873-5785 if you have any question.

Regards,


Myriam Payne
(954)873-5785

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

INTERIORS BY MYRIAM L.L.C

(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:

6750 SW 16th ST
PLANTATION
FLORIDA 33317

Mailing Address:

6750 SW 16th ST
PLANTATION
FLORIDA 33317

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:

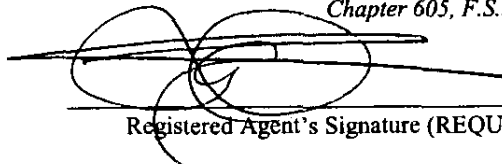
ANGEL A. YLISASTIGUI
Name

8912 WEST FLAGLER APT. 110
Florida street address (P.O. Box NOT acceptable)

MIAMI FL 33174
City Zip

FILED
14 SEP - 9 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Name and Address:

MYRIAM Y. PAYNE
6750 SW 16th ST
PLANTATION, FL. 33317

(Use attachment if necessary)

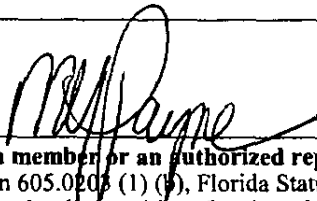
14 SEP - 9 PM 4:45
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.)

Myriam Y. Payne

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)