

L14000175861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

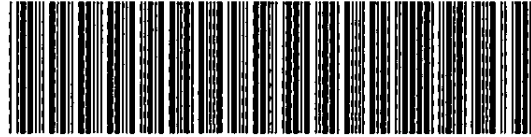
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W14-67145

Office Use Only



400265907254

11/03/14--01048--019 **125.00

FILED
2014 NOV 12 PM 4:06
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

NOV 13 2014
J. BRUCE

Dimi Nuring, Inc.
1708 Corporate Dr.
Boynton Beach, FL 33426
Phone: 561-278-2784
Fax: 561-732-5965

November 10, 2014

To: DEBRAH BRUZ
Co: Florida Dept of State Division of Corporations (Registration)
Re: ESTIVENCIA DAMISCA LLC (Articles of Organization-Conversion to LLC)
Fax: 850-245-6030

Dear Ms. Bruz:

In error, I Estivencia Damisca first filed as a corporation (by mistake) but wanted to actual register as an LLC. (Estivencia Damisca LLC)

I already requested for the \$70.00 refund for the Corporation.

Attached please find the rejection letter regarding registering as a LLC (filed date 11/05/2014).

I Estivencia Damisca give permission to register and process as Estivencia Damisca LLC asap.

Thank you.

Respectfully,

Estivencia Damisca

(#125.00 was mailed for registering as an LLC on 10/31/14 - check # 78082
Dimi Nuring, Inc. → on behalf of Estivencia Damisca)

RECEIVED
14 NOV 10 10:00
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

FILED
2014 NOV 12 PM 4:06
SECRETARY OF STATE
TALLAHASSEE FL 32304



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2014

ESTIVENCIA DAMISCA
8 SOUTHERN CROSS CIRCLE, APT #205
BOYNTON BEACH, FL 33463

SUBJECT: ESTIVENCIA DAMISCA LLC
Ref. Number: W14000067145

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TALLAHASSEE, FL
CLERK OF SUPERIOR COURT

We have received your document for ESTIVENCIA DAMISCA 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 you are requesting is unavailable, since it has been previously requested by another individual and the document was returned to the individual for corrections and has not yet been resubmitted.

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

Letter Number: 414A00023667

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Estivencia Danisca 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:

Estivencia Danisca
Name of Person

Estivencia Danisca LLC
Firm/Company

8 Southern Cross Circle - Apt #205
Address

Boynton Beach, FL 33463
City/State and Zip Code

DESTIVERCIAO.YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Estivencia Danisca at (561) 396-8521
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

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TALLAHASSEE FLORIDA
CLERK OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Estivencia Danisa 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:

Mailing Address:

8 Southern Cross Circle Same
Apt # 205
Boynton Beach, FL 33463

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:

Estivencia Danisa
Name

8 Southern Cross Circle Apt # 205
Florida street address (P.O. Box **NOT** acceptable)

Boynton Beach FL 33463
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.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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JANICE FLORES

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Estivencia Damica
8 Southern Cross Circle - Apt 205
Dayton Beach, FL 32117

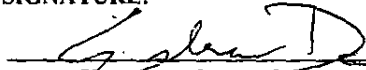
(Use attachment if necessary)

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.)

Estivencia Damica
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)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA