

L14000188691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

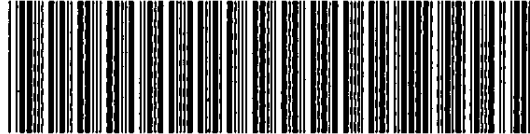
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

W14-70716

Office Use Only



400266504464

11/17/14--01029--015 **130.00

FILED

2014 DEC -2 PM 3:31

CLERK OF SUPERIOR COURT
JANUARY 2015

DEC 10 2014
CLERK



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 25, 2014

KATERYNA DUBCHAK-MATUSOVA
1525 WOODBRIDGE LAKES CIRCLE
WEST PALM BEACH, FL 33406

SUBJECT: KATERYNA DUBCHAK-MATUSOVA, LLC DBA SIMCHA
Ref. Number: W14000070716

We have received your document for KATERYNA DUBCHAK-MATUSOVA, LLC DBA SIMCHA and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this 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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 714A0002498

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2014 DEC -2 PM 3:31

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Kateryna Dubchak-Matusova, 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:

Kateryna Dubchak-Matusova
Name of Person

Kateryna Dubchak-Matusova, LLC
Firm/Company

1525 Woodbridge Lakes Circles
Address

West Palm Beach, FL 33406
City/State and Zip Code

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

For further information concerning this matter, please call:

Kateryna Dubchak-Matusova at (954) 398-0669
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

CLERK OF STATE
TALLAHASSEE, FLORIDA

2014 DEC -2 PM 3:31

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Kateryna Dubchak-Matusova, 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:

1525 Woodbridge Lakes Circle
West Palm Beach, FL 33406

1525 Woodbridge Lakes Circle
West Palm Beach, FL 33406

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:

Kateryna Dubchak-Matusova

Name

1525 Woodbridge Lakes Circle

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

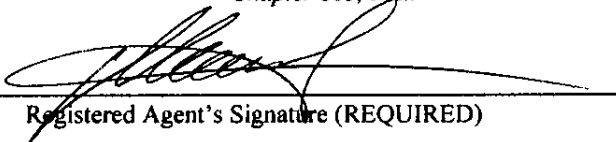
West Palm Beach

FL 33406

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)

FILED
2014 DEC -2 PM 3:31
CLERK OF STATE
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

MGR

Name and Address:

Kateryna Dubchak-Matusova

1525 Woodbridge Lakes Circle

West Palm Beach, FL 33406

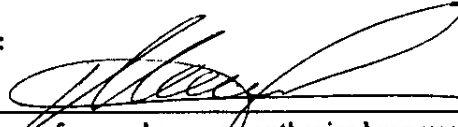
(Use attachment if necessary)

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.)

Kateryna Dubchak-Matusova

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)

FILED
2014 DEC -2 PM 3:31
CLERK OF STATE
TALLAHASSEE, FLORIDA