

L14 000 194409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

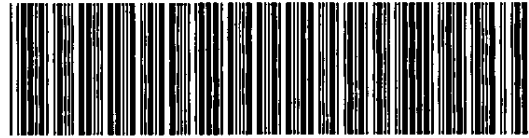
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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14 DEC 18 AM 11:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers DEC 23 2014

## FLORIDA LLC INSTRUCTIONS

1. Please sign the enclosed *Articles of Organization* on the last line of second page in the document (indicated as page 1 of 2) where it says "Registered Agent's Signature (REQUIRED)".
2. Please sign the same document on the third page of the document (indicated as page 2 of 2) below where it says "Required Signature" on the line that says "Signature of a member or an authorized representative of a member."
3. Please make a check for \$125 payable to "Florida Department of State".
4. Please mail your check along with signed Articles of Organization (include all 3 pages) to the following address: *pd Ch # 2014*  
✓ REGISTRATION SECTION  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL 32314
5. Once your paperwork is approved you will receive confirmation from the state. Once you receive it please notify us so that we can continue registering your company on the federal level.
6. Once you begin selling merchandise at retail (including online) you will need to obtain a sales tax license from the state. Please notify us when this happens and we will prepare the necessary paperwork for you. It does not need to be filed before you are ready to start making sales as the date of your first sale will need to be indicated on the form.
7. Every year you will be required to file an annual report with the state. This is separate from your tax filings and is due no later than May 1<sup>st</sup> of each year. You will receive an e-mail with instructions directly from the state sometime in January but you will be required to file it regardless if you receive the reminder or not. Florida annual reports are filed online at the following website between January and May 1<sup>st</sup> of each year: <https://services.sunbiz.org/Filings/AnnualReport/FilingStart>

Congratulations on starting your new business. We wish you great success!!!

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: LD INTERNET SOLUTIONS, 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:

LYNDA DAVIS

Name of Person

Firm/Company

7521 IRONBRIDGE CIRCLE

Address

DELRAY BEACH, FL 33446

City/State and Zip Code

DAVISLYNDA3@ATT.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LYNDA DAVIS

Name of Person

at ( 561 ) 908-2862

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 &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status &<br>Certified Copy<br>(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:

LD INTERNET SOLUTIONS, 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:

7521 IRONBRIDGE CIRCLE  
DELRAY BEACH, FL 33446

7521 IRONBRIDGE CIRCLE  
DELRAY BEACH, FL 33446

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:

LYNDA DAVIS

Name

7521 IRONBRIDGE CIRCLE

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

DELRAY BEACH

City

FL 33446

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.*

Lynda Davis

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

AMBR

**Name and Address:**

LYNDA DAVIS

7521 IRONBRIDGE CIRCLE

DELRAY BEACH, FL 33446

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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:**

*Lynda Davis*

**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.)

LYNDA DAVIS

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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