

LIS 000004765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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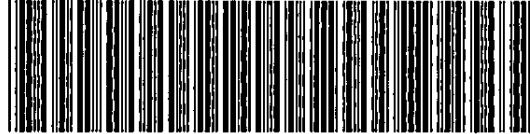
(Business Entity Name)

(Document Number)

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J. Shivers JAN 09 2015

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14 DEC 29 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2544



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 10, 2014

YONA MUNRO
PO BOX 330319
ATLANTIC BEACH, FL 32233

SUBJECT: MONTECITO GROUP LLC
Ref. Number: W14000073683

We have received your document for MONTECITO GROUP 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 appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 114A00026113

Montecito Group Inc

Registration Section
Division of Corporations
PO Box 6327
Tallahassee FL 32314

Dear Sir or Madam;

Enclosed are the Articles of Organization for a new Florida entity named Montecito Group LLC, for which I am the Authorized Member. I am currently the sole shareholder and president of a Florida company with a similar name, Montecito Group Inc., P10000102896.

Please therefore allow both entities to coexist.

Feel free to contact me if there are any questions.

Sincerely,



Yona Munro
President

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Montecito Group 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:

3415 Grenoble Dr
Jacksonville FL 32277

Mailing Address:

PO Box 330319
Atlantic Beach FL 32233

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:

Mary Taylor
Name

3415 Grenoble Dr
Florida street address (P.O. Box **NOT** acceptable)

Jacksonville FL 32266
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)

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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:

Yona Munro

308 Sand Aire House

Kendal LA9 4UA, United Kingdom

MGR

Colin Clive Munro

308 Sand Aire House

Kendal LA9 4UA, United Kingdom

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1/1/2015 (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:

Yona Munro

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.)

Yona Munro

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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