

215800009295

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

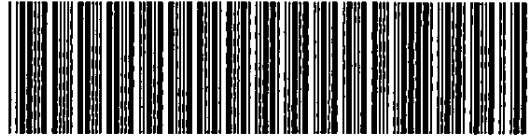
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W4-7009

Office Use Only



600266511296

11/17/14--01016--021 **130.00

FILED
2015 JAN -6 PM 4:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

2545 P13-73066

JAN 16 2015
D. BRUCE

2862 Gulf to Bay Blvd
Suite B

Clearwater, FL 33759

December 3, 2014

Florida Department of State

Division of Corporations

P O Box 6327

Tallahassee, FL 32314

ATTN: Deborah Bruce

Dear Ms Bruce,

In regards to Get Faded Inc, as the former owner of Get Faded Inc, I hereby advise the Florida Department of State, Division of Corporations that the named entity Get Faded Inc has been dissolved and I have no intention of reinstating my registration with the Florida Department of State. Therefor the name Get Faded is available for use by Richard Pinales for his company Get Faded LLC.

The document number for the dissolved corporation Get Faded Inc is P13000073066.

Sincerely,



Kelsey Harper

FILED
2015 JAN -6 PM 4:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 24, 2014

RICHARD PINALES
2862 GULF TO BAY BLVD, SUITE B
CLEARWATER, FL 33759

SUBJECT: GET FADED LLC
Ref. Number: W14000070619

FILED
2015 JAN -6 PM 4:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

We have received your document for GET FADED LLC and your check(s) totaling \$130.00. 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.

The document number of the name conflict is

P13000

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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: 014A00024944

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GET FADED 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:

RICHARD PINALES

Name of Person

GET FADED LLC

Firm/Company

2862 GULF TO BAY BLVD SUITE B

Address

CLEARWATER FL 33759

City/State and Zip Code

ypbob2000@gmail.com

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

For further information concerning this matter, please call:

RICHARD PINALES

Name of Person

at (813) 315-0682

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

2015 JAN -6 PM 4:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GET FADED 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:

2862 GULF TO BAY BLVD SUITE B
CLEARWATER, FL 33759

SAME AS PRINCIPAL OFFICES

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:

RICHARD PINALES

Name

2862 GULF TO BAY BLVD SUITE B

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

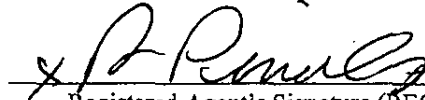
CLEARWATER

City

FL 33769

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
2015 JAN -6 PM 4:08
SECRETARY 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

P

Name and Address:

RICHARD PINALES

2862 GULF TO BAY BLVD SUITE B

CLEARWATER, FL 33759

2015 JAN - 6 PM 4: 08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

(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:

R. Pinales

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.)

RICHARD PINALES

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)