

L15000031157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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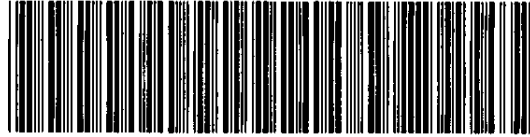
(Business Entity Name)

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15 JAN -9 AM 10:01
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TALLAHASSEE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOUTH SHORE TRADING COMPANY L.L.C.
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:

WILLIAM L. GIRTMAN
Name of Person

SOUTH SHORE TRADING COMPANY L.L.C.
Firm/Company

2500 GABRIEL ROAD
Address

FORT MEADE, FLORIDA 33841-9612
City/State and Zip Code

BILLGIRTMAN@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM L. GIRTMAN at (863) 285-7590
Name of Person Area Code Daytime Telephone Number
398-4598

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
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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DIVISION OF CORPORATIONS
FEB 18 2015

January 28, 2015

WILLIAM L GIRTMAN
SOUTH SHORE TRADING COMPANY LLC
2500 GABRIEL ROAD
FORT MEADE, FL 33841-9612

SUBJECT: SOUTH SHORE TRADING COMPANY L.L.C.
Ref. Number: W15000005979

We have received your document for SOUTH SHORE TRADING COMPANY L.L.C. 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 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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 915A00001676

THANK YOU FOR YOUR HELP

William L. Girtman
2/11/15

2/11/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SOUTH SHORE REAL ESTATE TRADING COMPANY L.L.C.
~~SOUTH SHORE TRADING COMPANY L.L.C.~~
(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:

2500 GABRIEL ROAD
FORT MEADE, FLORIDA
33841

Mailing Address:

2500 GABRIEL ROAD
FORT MEADE, FLORIDA
33841

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:

WILLIAM L. GIRTMAN AMBR, MGR
Name

2500 GABRIEL ROAD
Florida street address (P.O. Box NOT acceptable)

FORT MEADE FL 33841-9612
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.

William L. Girtman AMBR, MGR
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

2/11/15

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:

William L GIRTMAN
2500 GABRIEL ROAD
FORT MEADE, FLORIDA 33841-9612

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1/15/2015 (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:

William L. Girtman AMBR, MGR

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.)

William L. GIRTMAN AMBR, MGR

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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