

L15000037498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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J. BRUCE

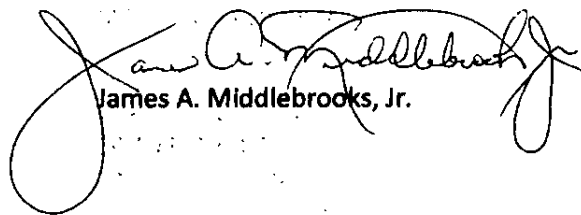
James A. Middlebrooks, Jr.  
1540 Raleigh Street  
Fort Myers, FL  
October 18, 2014

Registration Section  
Division of Corporations  
PO BOX 6327  
Tallahassee, FL 32314

To Whom It May Concern:

I am writing to inform the Florida Department of State, Division of Corporations, that I will not reinstate the incorporation of Anything Engraveable by Middlebrooks. The incorporation is inactive and I have no current plans or future plans to reactivate it.

Sincerely,

  
James A. Middlebrooks, Jr.

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TALLAHASSEE FLORIDA

STATE OF FLORIDA  
COUNTY OF LEE

THE FOREGOING/ATTACHED INSTRUMENT WAS ACKNOWLEDGED  
BEFORE ME Lorena Gomez THIS 10 DAY OF NOV,  
20 14, BY James Middlebrooks WHO IS PERSONALLY  
KNOWN TO ME OR HAS PRODUCED PO BOX 6327  
AS IDENTIFICATION AND WHO DID/DID NOT TAKE AN OATH

  
NOTARY PUBLIC



**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Anything Engraveable by Middlebrooks, 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:

Mr. Derrick J. Middlebrooks

Name of Person

Anything Engraveable by Middlebrooks, LLC

Firm/Company

1433 SE 11th Street

Address

Cape Coral, FL 33990

City/State and Zip Code

anythingengraveable@gmail.com

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

For further information concerning this matter, please call:

Mr. Derrick J. Middlebrooks

Name of Person

at ( 239 )

Area Code

823-3083

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Anything Engraveable by Middlebrooks, 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:**

Anything Engraveable by Middlebrooks, LLC  
1433 SE 11th Street  
Cape Coral, FL 33990

Anything Engraveable by Middlebrooks  
1433 SE 11th Street  
Cape Coral, FL 33990

**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.)

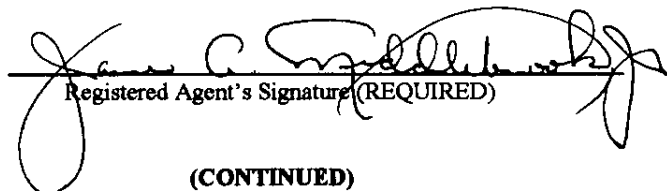
The name and the Florida street address of the registered agent are:

James A. Middlebrooks, Jr.  
Name

1540 Raleigh Street  
Florida street address (P.O. Box **NOT** acceptable)

Fort Myers FL 33916  
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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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

AMBR

**Name and Address:**

Derrick J. Middlebrooks

1433 SE 11th Street

Cape Coral, FL 33990

Temika L. Middlebrooks

1433 SE 11th Street

Cape Coral, FL 33990

(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.)

Derrick J. Middlebrooks

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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