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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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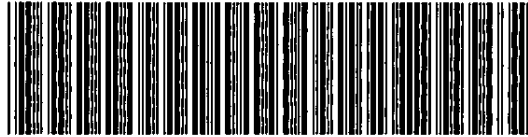
(Business Entity Name)

(Document Number)

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15 MAR 23 PM 1:53
MAR 23 2015
MAR 23 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Beach Weddings of Destin 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:

Tesha L. Timms or Donald R. Greene
Name of Person

Beach Weddings of Destin L.L.C.
Firm/Company

225-07 Main Street Suite H
Address

Destin FL 32541
City/State and Zip Code

beachweddingsofdestin@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tesha L. Timms at (850) 585-1695
Name of Person 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Beach Weddings of Destin 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:

Mailing Address:

Beach Weddings of Destin L.L.C.

225-07 Main Street Suite H

Destin FL 32541

Tesha Timms

3763 Misty Way

Destin FL 32541

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:

Tesha L. Timms

Name

3763 Misty Way

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

Destin

FL 32541

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..

Tesha L. Timms

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILE
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CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
FLORIDA
NORTH DISTRICT

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

MGR

Name and Address:

Tesha L. Timms

3763 Misty Way

Destin FL 32541

Donald R. Greene

3763 Misty Way

Destin FL 3251

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1 April 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.

Both Tesha L. Timms and Donald R. Greene are equal members in this corporation and if the buisness is dissolved the parties will spilt the assets on a 50/50 basis. Any/all debt associated with this buisness will be the responsibility of the party who took on the debt.

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.)

Tesha L. Timms

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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