L500068588

(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:
2824 W15-26271

Office Use Only



900270506589

03/23/15--01025--016 **125.00

TOBERACCENTAL

OFFICE WAS 28 FT S 28

EFFECTIVE DATE

APR 20 2015

S. YOUNG



April 15, 2015

CECILIA A WALSH 1015 INGRAHAM AVENUE UNIT 7 DELRAY BEACH, FL 33483

SUBJECT: 6814 SKYLINE LLC Ref. Number: W15000026271

We have received your document for 6814 SKYLINE 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):

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on March 23, 2015. Please amend your document accordingly.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 915A00007536

COVER LETTER

TO:	Registration'Section Division of Corporations		
SUBJEC		LINE LLC Limited Liability Company	
The encl	losed Articles of Organization and fee(s	are submitted for filing.	
Please re	eturn all correspondence concerning this	matter to the following:	
	Cecilia	A. Walsh Name of Person	
		Firm/Company	
	1015 I	ingraham Ave Unit	-7
	Delray B	each, FL 33483 City/State and Zip Code)
<u>.=</u>	E-mail address: (to be u	ised for future annual report notification)	
For furth	er information concerning this matter, p	elease call:	
	ecilia Walsh at Name of Person	Area Code Daytime Telephone No	umber
Enclosed	is a check for the following amount:		
[\$125.00	Filing Fee \$\frac{130.00}{2}\$ Filing Fee \$\frac{1}{2}\$ Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certification	00 Filing Fee, ficate of Status & fied Copy nal copy is enctosed)
	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	MA 23 EV

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		-		
The name of the Limited Liability Company is:				
(Must end with the words "L	Skyl imited Liability	NO LL Company, "L.L		
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of th	e Limited Liabi	lity Company is:	
Principal Office Address:	<u>Maili</u>	ng Address:		
Cecilia A. Walsh 6814 Skyline Dr. Delray Beach, FL 3344	. <u> </u>	Cecilia 1015 II Deliny Be	A. Walsh ngraham Ave Unit- lach, FL 33483	7
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as it another business entity with an active Florida regi	s own Registere	ered Agent's Si d Agent. You m	ignature: nust designate an individual or	
The name and the Florida street address of the regi	istered agent are	:		
<u>Cecilia</u>	A. Wa Name	lsh	·	
	Name			
Florida street address (P.0	Ingraham	Ave. L	Init 7	
			7	
City	seach FL	2596_ Zip)	
Having been named as registered agent and to acc the place designated in this certificate, I hereby capacity. I further agree to comply with the prov of my duties, and I am familiar with and accept	accept the appo isions of all stati	intment as regis utes relating to to of my position as	stered agent and agree to act in the he proper and complete performa	is nce
Registered Agent's	i A. L. Signature (REC	UIRED)		
			ित्र स्त्र स्ट्रि	
(CON	TINUED)		日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日	•
Pa	ge 1 of 2		# 23 FL 5 28	7

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager M 6-2	Pealia A. Wash
	1015 Ingraham Ave,
	Delian Reach, FL 339
	
EV: Effective date, if other than the date ctive date is listed, the date must be spe	of filing: Auroh 18, 2015. (OPTIONAL) ecific and cannot be more than five business days prior to or 90
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