

L15000085984

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 MAY -8 PM 4:58

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15 MAY 15 2015

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ocean Breeze Cleaning Services 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:

Tammy J Antini  
Name of Person

\_\_\_\_\_  
Firm/Company

383 Kenova Street  
Address

Port Charlotte FL 33954  
City/State and Zip Code

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

For further information concerning this matter, please call:

Tammy Antini at ( 941 ) 623-8568  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 19, 2015

TAMMY J ANTINI  
383 KENOVA STREET  
PORT CHARLOTTE, FL 33954

SUBJECT: OCEAN BREEZE CLEANING SERVICES LLC  
Ref. Number: W15000019515

RECEIVED  
15 APR 16 AM 10:00  
BUREAU OF CORPORATE  
REGISTRATION SERVICES

We have received your document for OCEAN BREEZE CLEANING SERVICES 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 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.

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 3, 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.

Tim Burch  
Regulatory Specialist II

Letter Number: 015A00005565

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 17, 2015

TAMMY J ANTINI  
383 KENOVA STREET  
PORT CHARLOTTE, FL 33954

SUBJECT: A-1 OCEAN BREEZE CLEANING SERVICES, LLC  
Ref. Number: W15000019515

RECEIVED  
15 MAY -8 AM 10:00  
DIVISION OF CORPORATIONS  
INFORMATION SERVICES

We have received your document for A-1 OCEAN BREEZE CLEANING SERVICES, 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):

You failed to make the correction(s) requested in our previous letter.

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 3, 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.

Tim Burch  
Regulatory Specialist II

Letter Number: 915A00007747

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

A-1 Ocean Breeze Cleaning Services 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:

383 Kenova Street  
Port Charlotte FL  
33954

Mailing Address:

383 Kenova Street  
Port Charlotte FL  
33954

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:

Tammy Antini  
Name

383 Kenova Street  
Florida street address (P.O. Box NOT acceptable)

Port Charlotte FL 33954  
City Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

Tammy Antini  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

~~AMGR~~ AMBR

Name and Address:

Tammy Antini  
383 Kenova Street  
Port Charlotte FL 33954

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15 MAY 18 PM 4:59  
TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 05-08-2015 (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:**

Tammy Antini

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.)

Tammy Antini

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)