# L15000134517

(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:

Office Use Only

W15-043078



600274077376

08/18/15--01033--001 \*\*160.00

SECRE IANT OF CORPORATION:

EFFECTIVE DATE 06/2/15



# FLORIDA DEPARTMENT OF STATE Division of Corporations

June 23, 2015

LYNETTE HATHAWAY 27221 STATE ROAD 56 SUITE 179 WESLEY CHAPEL, FL 33544

SUBJECT: HATHAWAY LLC Ref. Number: W15000043078

We have received your document for HATHAWAY LLC and your check(s) totaling \$160.00. 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.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is A94000001119 (HATHAWAY LIMITED PARTNERSHIP).

Please return the corrected original and one copy of 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) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 015A00013182

www.sunbiz.org

D' '-' - CO DOY COOT Mallahassas Florida 202

#### **CATHERINE INGRANDE**

#### ATTORNEY AT LAW

3621 Central Avenue

St. Petersburg, FL 33713

(727) 231 - 1930

Catherineingrande@gmail.com

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

May 21, 2015

RE: Hathaway LLC

I have enclosed two (2) Articles of Organization for Hathaway LCC for filing as well as the required fees (\$160.00 for Filing Fee, Certificate of Status, and a Certified Copy). Please return all correspondence concerning this matter to:

Dr. Lynette Hathaway 27221 State Road 56, Suite 179 Wesley Chapel, Florida 33544

For further information concerning this matter, please contact Dr. Lynette Hathaway at (813) 843-2620. Please use e-mail address drlynettehathaway@yahoo.com for future annual reports.

Sincerely,

s/Catherine Ingrande

Catherine Ingrande
Attorney at Law
Florida Bar # 115985
3621 Central Avenue
St. Petersburg, FL 33713
Tel # 727-231-1930
catherineingrande@gmail.com

## **Articles of Organization**

## Serenity Therapy Solutions LLC

ARTICLE I

12 -

NAME

The name of the organization is Serenity Therapy Solutions LLC.

ARTICLE II

PRINCIPAL OFFICE AND MAILING ADDRESS

The street address of this organization's principal office is 27552 Cashford Circle, Suite 102, Westley Chapel, FL 33544. The mailing address of this organization is 27221 State Road 56, Suite 179, Wesley Chapel, Florida 33544.

ARTICLE III

REGISTERED AGENT

The registered agent of this Limited Liability Company is Dr. Lynette Hathaway. The mailing address of the registered agent is 27221 State Road 56, Suite 179, Wesley Chapel, Florida 33544.

ARTICLE IV

**PURPOSE** 

This organization is formed for the purpose of the transaction of any or all lawful business for which limited liability companies may be organized under Florida Statutes, Chapter 608.

ARTICLE V

**DURATION** 

The period of duration of this Limited Liability Company is perpetual.

ARTICLE VI

**MANAGEMENT** 

This organization shall be Manager-Managed. Additional members may be admitted to the company upon the unanimous agreement of all current members, upon such terms and conditions as such members agree. The name and address of the initial member and person authorized to control the Limited Liability Company is Dr. Lynette Hathaway (MGR) at 27221 State Road 56, Suite 179 Wesley Chapel, Florida 33544.

ARTICLE VII

**EFFECTIVE DATE** 

The effective date of this Limited Liability Company is June 12, 2015.

SECRETARY OF STATE OF CORPORATION.

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 Florida Statutes, Chapter 605.

Dr. Synette Hathaway

. 🐪 '

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 in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, F.S.)

Dr. Lynette Hathaway

Janate Hathanay

15 IIIN 18 AM 9: LA