

L15000156264

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

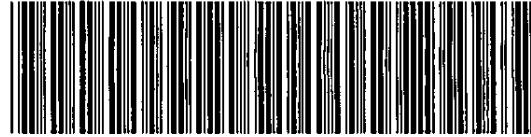
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~W15-16270~~

Office Use Only



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07/06/15--01031--011 **125.00

2015 SEP 14 PM 12:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~W15-125838~~

~~W15-125838~~

SEP 17 2015
T. BROWN

COVER LETTER

**TO: Registration Section
Division of Corporations
MH Distribution**

SUBJECT: _____
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:

Magdiel Fonseca

Name of Person

Firm/Company

2287 S Haverhill Rd

Address

West Palm Beach, FL 33415

City/State and Zip Code

magdielfonseca@icloud.com

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

For further information concerning this matter, please call:

Magdiel Fonseca 561 632-0400

Name of Person at (_____) _____
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

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

To Whom It May Concern:

I have received the attached documentation in regards to my selected business name conflicting with document # P03000125159.

I have also attached a copy of such document # and have not found conflict in any way.

The referenced document # is a completely different business form, it's an INC. entity and also the name of "ST. Petersburg Tree Service, INC." does not conflict with my company name of "MH Distribution, LLC".

I hope this information is considered and corrected at your earliest convenience.

I greatly appreciate the attention to this matter in advanced.

Thank you,

A handwritten signature in black ink, appearing to read 'Magdiel', with a stylized flourish extending to the right.

Magdiel Fonseca



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2015

MAGDIEL FONSECA
2287 S HAVERHILL RD
WEST PALM BEACH, FL 33415

RECEIVED JUL 30 2015

SUBJECT: MH DISTRIBUTION, LLC
Ref. Number: W15000046270

We have received your document for MH DISTRIBUTION, 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):

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 the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is P03000125159.

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) 245-6052.

Teresa Brown
Regulatory Specialist II

Letter Number: 515A00014353



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2015

MAGDIEL FONSECA
2287 S HAVERHILL RD
WEST PALM BEACH, FL 33415

SUBJECT: [REDACTED] MFH Distribution
Ref. Number: W15000046270

RECEIVED SEP 14 2015

We have received your document for MH DISTRIBUTION, 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):

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.

The document number of the name conflict is L15000125838.

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) 245-6052.

Teresa Brown
Regulatory Specialist II

Letter Number: 615A00016224

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MFH Distribution, 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:

2287 S Haverhill Rd
West Palm Beach, FL 33415

Mailing Address:

2287 S Haverhill Rd
West Palm Beach, FL 33415

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:

Magdiel Fonseca


Name

2287 S Haverhill Rd

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

<u>West Palm Beach</u>	<u>Florida</u>	<u>33415</u>
City	State	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)

2015 SEP 14 PM 12:16
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Magdiel Fonseca

2287 S Haverhill Rd

West Palm Beach, FL 33415

(Use attachment if necessary)

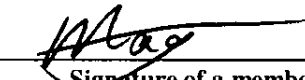
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.)

Magdiel Fonseca

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)