15000/7/152

(Requestor's Name)	
(Address)	
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(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Dusiness Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



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W15-059150

10/08/15



RECEIVED

15 OCT -6 AM 11: 15

FLORIDA DEPARTMENT OF STATE Division of Corporations

September 8, 2015

KATHERINE SELETOS 105 20TH AVE. ST. PETERSBURG, FL 33706

SUBJECT: DATE PALM PROPERTIES, LLC

Ref. Number: W15000059150

We have received your document for DATE PALM PROPERTIES, 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is P13000052437 (DATE PALM PROPERTIES, INC.).

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: 315A00018895

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DATE PALM PROPERTIES 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:
RATHGRINE SELETOS Name of Person
Firm/Company
105 20th Ave Address
City/State and Zip Code KSeletos @ tampakay
For further information concerning this matter, please call:
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 Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (Certified Copy (additional copy is enclosed))
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327 Tallahassee, FL 32314

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 Confipany is:		
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")		
(ivides one with the words Edinica Elability Company, E.E.C., of EEC.)		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
105 20+h Ave Same		
ST PETERS BURG Krach.		
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:		
KATHERINE CELETOR		
Name		
KATHERINE SELETOS Name 105 20th Ave		
Florida street address (P.O. Box NOT acceptable)		
ST PETERSBURG Beach, FL 33706 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		
Lathanie Seletas		
Registered Agent's Signature (REQUIRED)		

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager LATHERINE SELETOS MIGEL	105 20th Are ST ATGESBURG Brack, The 33706
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date of (If an effective date is listed, the date must be spective date of filing.)	of filing: 4-1-2015. (OPTIONAL) cific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed a state's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	ne Selites
This document is execute I am aware that any false	ther or an authorized representative of a member. d in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
KATHI	BRINE SELETOS

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2