# L15000190208

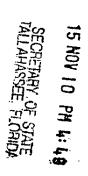
(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
:		
W15-	71741	





500278410925

10/26/15--01044--009 \*\*130.00





### **COVER LETTER**

Division of Corporations				
ISLAND GLOW INVESTMENTS, LLC				
Name of Limited Liability Company				
The enclosed Articles of Organization and fee(s) are su	bmitted for filing.			
Please return all correspondence concerning this matter	to the following:			
ALEXANDRA D. SALVADOR, ESQ.				
Name of Person				
ALEXANDRA D. SALVADOR, P.A.				
	Firm/Company			
1785 WEST 33 PLACE				
	Address			
HIALEAH, FL 33012				
•	State and Zip Code			
ASALVADOR@SUNSHINEWINDOWS.				
E-mail address; (to be used for	future annual report notification)			
For further information concerning this matter, please ca	dl:			
ALEXANDRA SALVADOR 305	364-9952			
Name of Person Area	Code Daytime Telephone Number			
Enclosed is a check for the following amount:				
\$125.00 Filing Fee \$\times \text{Certificate of Status} \tag{Certificate of Status}	\$155.00 Filing Fee & \$160.00 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			



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 29, 2015

ALEXANDRA D. SALVADOR, ESQ. ALEXANDRA D. SALVADOR, P.A. 1785 WEST 33 PLACE HIALEAH, FL 33012

SUBJECT: ISLAND GLOW INVESTMENTS, LLC

Ref. Number: W15000071741

We have received your document for ISLAND GLOW INVESTMENTS, 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):

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 315A00022958

# Island Glow Investments, LLC.



15 NOV 10 PM 4: 40

November 6, 2015 SECRETALLAH

Attn: Ms. Valerie Herring Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314

Ref Number: W15000071741

Good morning Ms. Herring,

Please accept the following in response to your letter dated October 29, 2015 in reference to the registration of Island Glow Investments, LLC.

Your letter states our filing was rejected because our registered agent did not have an active corporate registration in your database. However, our registered agent is not a corporation; therefore, he would not be registered as such. The registered agent is an individual and the designations following his name are his trade title. He is a CPA (certified public accountant) and a PA (public accountant). The PA at the end of his name does not refer to a corporation or association.

If you have any further questions on any of the above written, please do not hesitate to contact me at (305) 364-9952.

Kindest regards,

Alexandra Di Salvador, Esq.

General Counsel

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APPROVEÉ AND FILED

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

15 NOV 10 PM 4: 49

ISLAND GLOW INVESTMENTS, LLC	SECRETARY OF STATE
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LEALLYAHASSEE. FLORID
ARTICLE II - Address:	
The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1785 WEST 33 PLACE	1785 WEST 33 PLACE
HIALEAH, FL. 33012	HIALEAH, FL. 33012
another business entity with an active Florida registration.)  The name and the Florida street address of the registered ager	nt are:
<u>ROGER ALTER, CPA, P.</u> Nar	
10061 NW 1 COURT	_
Florida street address (P.C	D. Box NOT acceptable)
DI ANTATION	ELODIDA 33324

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..

City

State

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Zip

Page 1 of 2

ed to manage and control the Limited	APPROVEL AND Liability Company: FILED
Name and Address:	15 NOV 10 PM 4:4
JAIME PUERTO 10901 SW 88 CT. MIAMI, FL. 33176	SECRETARY OF STATE TALLAHASSEE FLORID
CAROLINA SENDON 10901 SW 88 CT. MIAMI, FL. 33176	
ng: and cannot be more than five busing the applicable statutory filing requirente's records.	ess days prior to or 90 days after
or an authorized representative of accordance with section 605.0203 (1) mation submitted in a document to the year provided for in s.817.155, F.S.	) (b), Florida Statutes.
ed or printed name of signee	
	Name and Address:  JAIME PUERTO 10901 SW 88 CT. MIAMI, FL. 33176  CAROLINA SENDON 10901 SW 88 CT. MIAMI, FL. 33176  MIAMI, FL. 33176  or an authorized representative of accordance with section 605.0203 (1 mation submitted in a document to the y as provided for in s.817.155, F.S.

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)