

L15000192976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

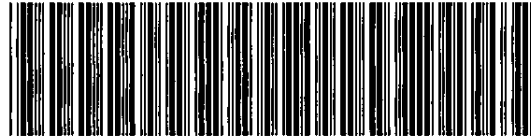
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 NOV 16 PM 1:23

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Magguy Articles Divers 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:

Anthony Dominique

Name of Person

Firm/Company

4626 Oak Haven Drive Unit 207

Address

Orlando, FL 32839

City/State and Zip Code

Berlynana@yahoo.com

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

For further information concerning this matter, please call:

Anthony Dominique      321      948-1149  
at (      )  
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**

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Magguy Articles Divers 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:

885 N. Powers Drive

Suite -A

Orlando, Florida. 32818

Mailing Address:

885 N. Powers Drive

Suite-A

Orlando, Florida. 32818

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:

Anthony Dominique

Name

4626 Oak Haven Drive Unit 207

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

Orlando

Florida

32839

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..

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Anthony Dominique

4626 Oak Haven Drive Unit 207

Orlando, Florida. 32839

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TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

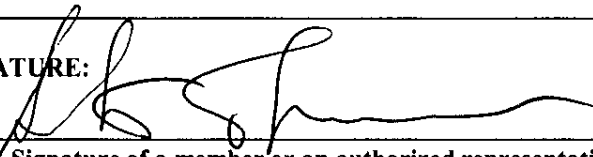
**ARTICLE V:** Effective date, if other than the date of filing: 11/20/2015 (OPTIONAL)

(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.)

**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.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Anthony Dominique

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)



RECEIVED OCT 21 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 1, 2015

ANTHONY DOMINIQUE  
4626 OAK HAVEN DRIVE UNIT 207  
ORLANDO, FL 32839

SUBJECT: MAGGUY ARTICLES DIVERS LLC  
Ref. Number: W15000065271

We have received your document for MAGGUY ARTICLES DIVERS 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 document must be signed by a member or an authorized representative of a member.

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Christine Haney  
Regulatory Specialist II  
New Filing Section

Letter Number: 815A00020736



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 26, 2015

ANTHONY DOMINIQUE \*\*2ND REJECT \*\*  
4626 OAK HAVEN DRIVE UNIT 207  
ORLANDO, FL 32839

SUBJECT: MAGGUY ARTICLES DIVERS LLC  
Ref. Number: W15000070787

We have received your document for MAGGUY ARTICLES DIVERS 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 effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Christine Haney  
Regulatory Specialist II  
New Filing Section

Letter Number: 015A00022612

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