

L16000007080

(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

W1500076967

JAN 14 2016

T. SCOTT



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11/16/15--01056--014 **135.00

16 JAN 13 PM 12:00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 23, 2015

BARRY STEPHEN WHITMORE
25551 CELESTIAL ST
CHRISTMAS, FL 32709-9666

SUBJECT: LVS UNLIMITED OF FLORIDA LLC
Ref. Number: W15000082223

The fee to file is \$130.,

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 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.

Tyrone Scott
Regulatory Specialist II

Letter Number: 815A00026910

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LVS Unlimited of Florida
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:

Barry Stephen Whitmore
Name of Person
LVS Unlimited of Florida
Firm/Company
25551 Celestial St.
Address
Christmas, FL 32709-9666
City/State and Zip Code
swhipper1@hotmail.com and lvsunlimited@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barry Stephen Whitmore at (863) 292-1562
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee	<input checked="" type="checkbox"/> \$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)
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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

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL
JAN 12 2006

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LVS. Unlimited of Florida 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:

25551 Celestial St, Christmas, FL 327099666

Mailing Address:

25551 Celestial St, Christmas, FL 32709

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:

Barry Stephen Whitmore

Name

25551 Celestial St, Christmas, FL 327099666

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

Christmas

City

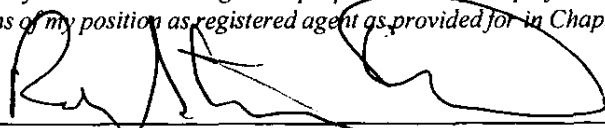
Florida

State

32709-9666

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)

16 JAN 13 PM 12:00

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

President /CEO

Name and Address:

Barry Stephen Whitmore

25551 Celestial St, Christmas, FL 327099666

VP/Secretary Treasurer

Heather Whitmore Dingman

6725 Hill Gail Trail Tallahassee, FL

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ~~January 1, 2016~~ Jan. 1, 2016 (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.

Should any of the board members become unable to continue their duties as equal partner through illness there will be a

board meeting to determine who will take over their role in the LLC. Should any of the board members die their interest

in the LC will cease and all monies owned to be paid to those who are their heirs within 90 days of the death

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.

Barry Stephen Whitmore

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)