

L16000007167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Effective date 01/01/2016

FILED
16 JAN -4 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 14 2016

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OZZYBALL, 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:

LILA RISTEVSKA

Name of Person

OZZYBALL, LLC

Firm/Company

331 COCOANUT ROW

Address

PALM BEACH, FLORIDA, 33480

City/State and Zip Code

OZZYBALL@GMAIL.COM

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

For further information concerning this matter, please call:

LILA RISTEVSKA

561

713-6403

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

FILED
16 JAN -4 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2015

LILA RISTEVSKA
OZZYBALL, LLC
331 COCOANUT ROW
PALM BEACH, FL 33480

SUBJECT: OZZYBALL, LLC
Ref. Number: W15000078608

We have received your document for OZZYBALL, 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):

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.

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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 015A00025493

RECEIVED
DIVISION OF CORPORATIONS
DEC 11 2015
4 11 PM

AFFIDAVIT

State of Florida)

) S.S.

County of Palm Beach)

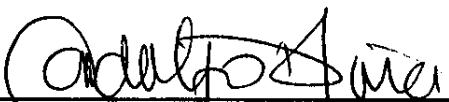
Lila Ristevska, of Palm Beach, Florida,
Make oath and say that:

I Lila Ristevska of Palm Beach Florida am the President of
OzzyBall, Inc., a foreign corporation inactive in Florida. The
Corporation has not been in active business in the state of
Florida and has no intention of reinstating or doing business in
the future.

Subscribed and sworn to)

Before me, on the)

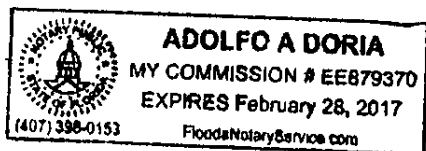
December 22, 2015.)

)

NOTARY PUBLIC)

My commission expires: Feb 28, 2017.)


Lila Ristevska



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

OZZYBALL, 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:

331 COCOANUT ROW
PALM BEACH, FLORIDA 33480
SUITE 1

Mailing Address:

331 COCOANUT ROW
PALM BEACH, FLORIDA, 33480
SUITE 1

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:

LILA RISTEVSKA

Name

331 COCOANUT ROW SUITE 1

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

| | | |
|-------------------|----------------|--------------|
| <u>PALM BEACH</u> | <u>FLORIDA</u> | <u>33480</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)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MANAGING MEMBE

Name and Address:

LILA RISTEVSKA

331 COCOANUT ROW SUITE 1

PALM BEACH, FLORIDA 33480

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JANURAY 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.

Company may engage in and to transact any lawful business for which Florida LLCs allow.

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.

LILA RISTEVSKA

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)