

L16000026834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

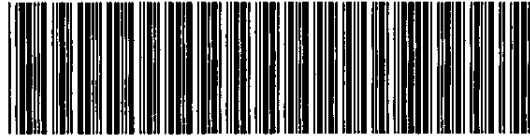
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 FEB -5 PM 12:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. Gulligan FEB - 8 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Emanuella's Boutique 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:

Brittnie Robinson

Name of Person

Emanuella's Boutique LLC.

Firm/Company

21728 arriba real Apt 346

Address

Boca Raton FL 33433

City/State and Zip Code

Brittnie.Robinson@gmail.com

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

For further information concerning this matter, please call:

Brittnie Robinson at (339) 364-1475

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 22, 2016

BRITTNIE ROBINSON
21728 ARriba REAL APT. 341
BOCA RATON, FL 33433

SUBJECT: EMANUELLA'S BOUTIQUE LLC
Ref. Number: W16000004654

*Name changed
Brittnie's Boutique*

We have received your document for EMANUELLA'S BOUTIQUE 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):

List only (1) person as the Registered Agent. Cant read the Apt # 341?,

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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 016A00001481

RECEIVED
16 FEB -5 PM 12:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~Emanuella's Boutique LLC~~ Brittanie's Boutique 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:

21728 Arriba Real Apt 34K
Boca Raton FL 33433

Mailing Address:

21728 Arriba Real Apt 34K
Boca Raton FL 33433

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:

Peter Robinson
Name

5080 Heatherhill Lane #8
Florida street address (P.O. Box **NOT** acceptable)
Boca Raton FL 33486
City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company, I hereby accept the appointment as registered agent and agree to act in this capacity, and 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.

Peter Robinson
Registered Agent's Signature (REQUIRED)

16 FEB -5 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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

Owner

Name and Address:

Brittanie Robinson
21728 Arriba Real Apt 346
Boca Raton FL 33423

(Use attachment if necessary)

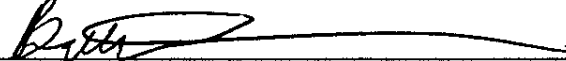
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

Brittanie Robinson

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)

FILED
16 FEB -5 PM 12:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA