

L16000050/90

(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:

W16-15082

Office Use Only



400282365174

02/22/16--01027--003 **160.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAR 14 AM 7:34

APPROVED
AND
FILED

Handwritten signature/initials

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Jackie Riley Makeup
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:

Jacqueline Riley

Name of Person

Jackie Riley Makeup

Firm/Company

106 Alameda Court unit #140

Address

Tampa fl, 33609

City/State and Zip Code

info@jackierileymakeup.com

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

For further information concerning this matter, please call:

Jacqueline Riley

813

368-0055

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 1, 2016

JACQUELINE RILEY
106 ALAMEDA COURT UNIT #140
TAMPA, FL 33609

SUBJECT: JACKIE RILEY MAKEUP LLC
Ref. Number: W16000015087

We have received your document for JACKIE RILEY MAKEUP LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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: 516A00004245

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APPROVED
AND
FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

16 MAR 14 AM 7:34

Jackie Riley Makeup LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC")

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

106 Alameda Ct unit #140
Tampa FL, 33609

106 Alameda Ct unit #140
Tampa FL, 33609

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:

Jacqueline Riley

Name

106 Alameda ct unit #140

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

Tampa

FL

33609

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..

Jacqueline Riley
Registered Agent's Signature (REQUIRED)

(CONTINUED)

APPROVED
AND
FILED

ARTICLE IV-

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

16 MAR 14 AM 7:34

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Jacqueline Riley

106 Alameda ct unit #140

Tampa FL, 33609

(Use attachment if necessary)

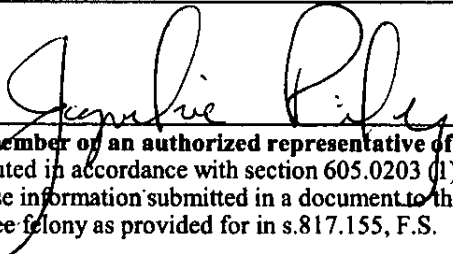
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

Jacqueline Riley

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)