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## **COVER LETTER**

	istration Section sion of Corporations	
SUBJECT:	Kaylee's S Name of L	tarfish Enterprises, LL
The enclosed	Articles of Organization and fee(s) a	are submitted for filing.
Please return	all correspondence concerning this r	natter to the following:
<del>.</del>	Kaylee	Name of Person
_		Firm/Company
	9555 5	Address
_		Address
	Lecsb	org FC 34788
	Trudreambe E-mail address: (to be use	City/State and Zip Code  City/State and Zip Code  City/State and Zip Code  Code Company Compan
For further info	ormation concerning this matter, plea	ase call:
K	Name of Person	Le 08 780 - 711)  Area Code Daytime Telephone Number
Enclosed is a	check for the following amount:	
\$125.00 Filin	ng Fee \$130.00 Fiting Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  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:

## Kaylee's Starfish Enterprises, LLC

ARTICLE II - Address: The mailing address and street address of the principal office of the Limité Liability Company is:

**Principal Office Address:** 

Mailing Address:

9555 Silver Lake Dr.

9555 Silver Lake Dr.

Leesburg, FL 34788

Leesburg, FL 34788

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:

Kaylee Siber 9555 Silver Lake Dr. Leesburg, FL 34788

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: Name and Address: "AMBR" = Authorized Member "MGR" = Manager

Managing Member

Kaylee Siber

9555 Silver Lake Dr. Leesburg, FL 34788

ARTICLE V: Effective date, if other than the date of filing: 4/1/2016.

ARTICLE VI: Other provisions, if any. None

**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.

Kaylee Siber
Name of Signee