

L16000006757

(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



200282754912

03/03/16--01019--023 \*\*130.00

FILED  
16 MAR 28 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

57 4/6/16

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Beach Cleaning Services of New Smyrna  
Name of Limited Liability Company Beach LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Fuhrman  
Name of Person

Beach Cleaning Services of New Smyrna  
Firm/Company Beach LLC

721 Live Oak St.  
Address

N.S.B. Fla. 32168  
City/State and Zip Code

beachcleaning@outlook.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Fuhrman at 386 693-6700  
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 ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy
- paid* (additional copy is enclosed) (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 MAR 28 PM 4:20  
TALLAHASSEE, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FILED

16 MAR 28 PM 4:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

March 14, 2016

LISA FUHRMAN  
721 LIVE OAK STREET  
NEW SMYRNA BEACH, FL 32168

SUBJECT: BEACH CLEANING SERVICES LLC  
Ref. Number: W16000018869

We have received your document for BEACH CLEANING SERVICES 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 list the city name in its entirety abbreviation is not acceptable.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent and street address must be consistent wherever it appears in your document.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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.

Claretha Golden  
Regulatory Specialist II

Letter Number: 116A00005204

New Filing Section

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Beach Cleaning Services of New Smyrna Beach 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:

721 Live Oak St.  
New Smyrna Beach, FL 32168

Mailing Address:

721 Live Oak St.  
New Smyrna Beach, FL 32168

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:

Beach Electric of New Smyrna Inc  
Name  
721 Live Oak St  
Florida street address (P.O. Box **NOT** acceptable)  
New Smyrna Beach Florida 32168  
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..

Kandy D. Beach  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
16 MAR 28 PM 4:20  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

MGR

AMBR

Lisa Fuhrman

204 Sandy Ln.

New Smyrna Beach, FL 32168

Shelly Kirkland

2903 J Royal Palm Dr.

Edgewater, Fla. 32141

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: Feb 20, 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.

**REQUIRED SIGNATURE:**

Lisa Fuhrman

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.

Lisa Fuhrman

Typed or printed name of signer

**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 MAR 28 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304