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PICK-UP	WAIT	MAIL.
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

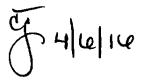




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16 NAR 28 PH 4: 20



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 Smyrno Beach LLC
721 Live Oak St. Address
City/State and Zip Code City/State and Zip Code Deach Cleaning @ 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 1693-6700 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 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 Z661 Executive Center Circle Tallahassee, FL 32301



FILED

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SECRETARY OF STATE
IALLMHAS EVEN OPERA

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 <u>signed</u> 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.

Letter Number: 116A00005204

Claretha Golden Regulatory Specialist II New Filing Section

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Beach Cleaning Services of New Smyrn (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") Beach LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address: Mailing Address: 721 Live Oak St. New Smyrna Beach, FL 32168 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: Color Color
Florida street address (P.O. Box NOT acceptable)
New Smynna Board Horida 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 Registered Agent's Signature (REQUIRED)
(CONTINUED)
Page 1 of 2

16 MAR 28 PH 4: 20

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Lisa Fuhrman 204 Sandy Ln.
MBR	Shelly Kirkland 2903 J Royal Palm Dr. Edgewater, Fla. 32141
	
(Use attachment if necessary)	
	ng: $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ (OPTIONAL)
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ffective date is listed, the date must be specific as e of filing.) If the date inserted in this block does not meet the nument's effective date on the Department of State CLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member of the document is executed in a I am aware that any false inform	and cannot be more than five business days prior to or 90 or eapplicable statutory filing requirements, this date will not

Page 2 of 2

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\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)