

L16000070384

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03/22/16 12:00

W16-023022

04/12/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 29, 2016

JOOK-TING SHIM
565 FOX HUNT CIR.
LONGWOOD, FL 32750-3349

SUBJECT: A PLUS TEAM LLC
Ref. Number: W16000023022

RECEIVED
16 APR 11 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for A PLUS TEAM LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 216A00006366

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A Plus Team, 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:

Jook-Ting "J.T." SHIM
Name of Person

A Plus Team LLC
Firm/Company

565 Fox Hunt Circle
Address

Longwood FL 32750-3349
City/State and Zip Code

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

For further information concerning this matter, please call:

J.T. Shim at (407) 256-0001
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

A Plus Team 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:

Mailing Address:

565 Fox Hunt Circle
Longwood FL 32750-3349

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:

Michael C. Berry
Name

53 CORDON ROSE DRIVE

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

ORLANDO

FL.

32825

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..

Michael C. Berry
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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STATE
SECRETARY OF
CORPORATIONS
JAN 11 2011
11:12:00

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:

Jook-Ting SHIM, AMBR

565 Fox Hunt Cir
Longwood FL 32750-3349

(Use attachment if necessary)

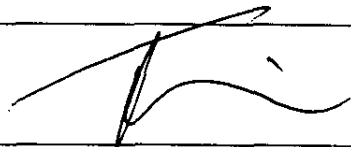
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

JOOK-TING SHIM

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
DEPT OF STATE
15 FEB 11 PM 12:00