# IN THE CIRCUIT COURT, IN AND FOR, PINELLAS COUNTY, FLORIDA CASE NO.: 16-006985-CI

LISA POLETZ,

Plaintiff,

v.

SEASHORE LLC, JENNIFER ROBINSON, and, THEODORE GRANT,

Defendants.

### FINAL DEFAULT JUDGMENT

THIS CAUSE having come before the Court on Plaintiff, Lisa Poletz, Motion for Default Final Judgment Against Seashore, LLC for Injunctive Relief ("Motion"), the Court having reviewed the relevant pleadings, reviewed the Affidavit of Lisa Poletz, and exhibits thereto, having received no response from Seashore LLC, and otherwise being fully advised on the premises, the Court HEREBY FINDS:

1. Seashore LLC, Document Number: L16000093090 ("Seashore, LLC") and the fictitious name filing "Seashore," Registration Number: G16000047650, were procured by fraud and through identity theft.

The Court having reviewed the relevant pleadings, reviewed the Affidavit of Lisa Poletz, and exhibits thereto, having received no response from Seashore LLC, taking into account the above findings of fact, and otherwise being fully advised on the premises, HEREBY ORDERS:

1. Seashore LLC is enjoined from operating business by, through, and/or from Seashore LLC;

2. The Florida Division of Corporations is directed to delete the entity, Seashore

LLC, Document Number: L16000093090, from www.sunbiz.org; from its records, and anywhere

else it may exist;

3. The Florida Division of Corporations is directed to delete the fictitious name

filing "Seashore," Registration Number: G16000047650, from www.sunbiz.org; from its records,

and anywhere else it may exist;

4. The website located on the domain seashorecompany.com is to be immediately

taken down and deleted and Seashore and Seashore, LLC is enjoined from utilizing same in the

future directly, or indirectly;

Any and all other websites through which Seashore, LLC or Seashore may be 5.

operating related in any way to Seashore LLC\_are to be taken down and deleted and Seashore

and Seashore, LLC are enjoined from being utilized same in the future, directly or indirectly;

and,

Seashore and Seashore LLC are enjoined from conducting business through, or 6.

using any of the personal identification information of Lisa Poletz for any reason.

DONE and ORDERED in Chambers in Pinellas County, Florida on this

TRUE COPY Original Signed

dayaf

. 2017.

JAN 1 3 2017

HONORABLE JACK R. ST. ARNOLD

CIRCUIT COURT JUDG

Copies furnished to:

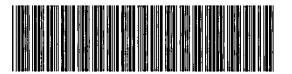
Joelle Schultz, Esq.

Department of State Florida Division of Corporations Clifton Building 2661 Executive Center Cir. Tallahassee, FL 32301

# L16000093090

| (Re                     | questor's Name)   |           |
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| PICK-UP                 | ☐ WAIT            | MAIL      |
| (Bu                     | siness Entity Nam | ne)       |
| (Do                     | cument Number)    |           |
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| Special Instructions to | Filing Officer:   |           |
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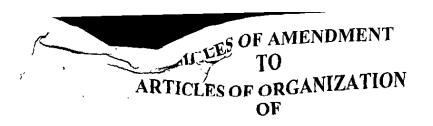
| Div            | ision of Corp   | oorations                       |  |  |
|----------------|-----------------|---------------------------------|--|--|
| SUBJECT:       | SEASHORE        | E, LLC                          |  |  |
|                |                 | Name of Lim                     | ited Liability Company                       |  |
| The anclosed   | I Articles of / | Amendment and fee(s) are sub-   | mitted for filing                            |  |
|                |                 |                                 |  |  |
| Please return  | all correspor   | ndence concerning this matter   | to the following:                            |  |
|                |                 | LISA M POLETZ                   |  |  |
|                |                 |                                 | Name of Person                               |  |
|                |                 |                                 | Firm/Company                                 |  |
|                |                 |                                 | rimicompany                                  |  |
|                |                 | 4765 SPRING AVENUE              |  |  |
|                |                 | <del></del>                     | Address                                      |  |
|                |                 | CLEARWATER, FL 3376             | 2  |  |
|                |                 |                                 | City/State and Zip Code                      |  |
|                |                 | E-mail address: (               | to be used for future annual report notific  | cation)  |
| For further in | nformation co   | ncerning this matter, please ca | all:   |  |
| LISA M. PC     | DLETZ           |                                 | 727 573-2010<br>at ()                        |  |
|                | Name of         | Person                          | Area Code Daytime                            | Telephone Number   |
| Enclosed is a  | a check for the | e following amount:             |  |  |
| ■ \$25.00 F    |                 | □ \$30.00 Filing Fee &          | □ \$55.00 Filing Fee &                       | □ \$60.00 Filing Fee,  |
| 20.00          |                 | Certificate of Status           | Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy (additional copy is enclosed) |
|                |                 |                                 |  |  |

TO:

**Registration Section** 

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



Seashore 110

| (Name of the Limited)  | Liability Company as it now appears on our re<br>Florida Limited Liability Company) | cords.)                            |
|--|---|------------------------------------|
| The Articles of Organization for this Limited Liabi Florida document number                  | ility Company were filed on 5118  |                                    |
| This amendment is submitted to amend the following   | ing:  |                                    |
| A. If amending name, enter the new name of th  |   |                                    |
| The new name must be distinguishable and contain the words                                   | s "Limited Liability Company," the designation                                      | "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicabl  | e:  |                                    |
| (Principal office address MUST BE A STREET A   | ADDRESS)  |                                    |
| Enter new mailing address, if applicable:<br>(Mailing address MAY BE A POST OFFICE BO        | ``  | 15 AUS - 1 PM 12<br>SECRETARY OF S |
| B. If amending the registered agent and/or registered agent and/or the new registered office |   | eords, entersthe name of the new   |
| Name of New Registered Agent:  |   |                                    |
| New Registered Office Address:   |   |                                    |
|  | Enter Florida street a  |                                    |
| ~  | City  | , Florida Zip Code                 |

#### New Registered Agent's Signature, if changing Registered Agent:

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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>   | <u>Address</u>       | Type of Action       |
|--------------|---------------|----------------------|----------------------|
| MGR          | LISA M POLETZ | 4765 SPRING AVENUE   | □ Add                |
|              |               | CLEARWATER, FL 33762 | ■ Remove             |
|              |               |                      | Change               |
|              |               |                      |                      |
|              |               |                      | ☐ Remove             |
|              |               |                      | Change               |
|              |               | <del></del>          | □ Add                |
|              |               |                      | Remove               |
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|              |               |                      | Add                  |
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|              |               |                      | As D Change          |
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|              |               |                      | Remove  ORNO  Change |
|              |               |                      | Change               |
| •            |               |                      |                      |
|              |               |                      | ☐ Remove             |
|              |               |                      | ☐ Change             |

| listed for SEASHORE, LL  | .C, nor do I have anything to do with this company in any ma   | nner. My identity has           |
|--|--|---------------------------------|
| been stolen and used here  | to establish this LLC with the Division of Corporations. My  | credit card was fradulently     |
| used to pay the fees to the  | Div of Corp to establish this LLC on 5/11/16. I filed a police   | e report on 7/26/16 with        |
| the City of Clearwater Poli  | ice Department on Myrtle Avenue in Clearwater, FL. Police  | report number is                |
| CW16-105115. I am not a  | affiliated in any way with SEASHORE LLC.   |                                 |
| If any further information   | is needed from me, please call me at my work number listed   | in this document.               |
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| te: If the date inserted in this<br>nument's effective date on the | nust be specific and cannot be prior to date of filing or more than 90 of block does not meet the applicable statutory filing requirement of State's records.  Yed effective date, but not an effective time, at 1 | ents, this date will not be lis |
|  |  |                                 |
| JULY 29  | 2016   |                                 |
| ed JULY 29   | 11 Polet   | 16<br>SEC<br>TALL               |
| JULY 29  | Signature of a member or authorized representative of a member   | TALLANDIA                       |
| LISA M. POLETZ   | Signature of a member or authorized representative of a member   | 45.85.4<br>4.85.44<br>4.94.47   |
| ed   | M. Polets  | TALLSHISST DEST                 |

Filing Fee: \$25.00