

L16000094635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

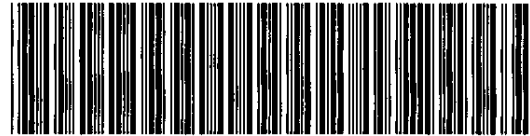
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status ☒

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MAY 19 2016  
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U.S. DEPT. OF JUSTICE

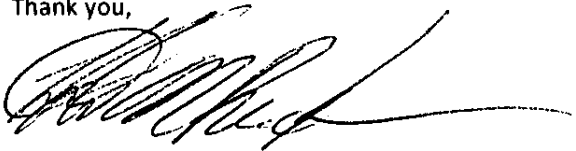
Tiffany Rucker  
Owner/Operator  
DBA: Inspired 2 Design Home Furnishings  
4408 E Tarpon Drive  
Tampa, FL 33617  
May 9, 2016

Florida Department of State  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Florida Department of State:

I am writing to ensure that I am taking the right steps to change the status of my business. I am currently operating under the dba, Inspired 2 Design Home Furnishings. I want to register my dba as a LLC to protect my personal assets should that ever become an issue. I have the EIN 81-1549546 and the Sales and Use number 39-8016925296-6. I called a couple of times to get a clear answer and was advised to register as a new LLC and pay the \$125 fee. Hopefully this was the correct information. I have enclosed an application and check for the LLC registration. Also, I wanted to know if I will have to change my EIN and/or reregister my sales and use tax information? I can be reached by phone at 813-458-1871 or by email at [inspired2designhf@gmail.com](mailto:inspired2designhf@gmail.com).

Thank you,

A handwritten signature in black ink, appearing to read 'Tiffany Rucker', with a long horizontal flourish extending to the right.

Tiffany Rucker

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Inspired 2 Design Home Furnishings, 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:

Tiffany Rucker

Name of Person

Inspired 2 Design Home Furnishings, LLC

Firm/Company

4408 E Tarpon Drive

Address

Tampa, FL 33617

City/State and Zip Code

inspired2designhf@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tiffany Rucker

813

458-1871

at ( )

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:

Inspired 2 Design Home Furnishings, 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:**

7415 US HWY 301 S  
Riverview, FL 33578

**Mailing Address:**

4408 E Tarpon Drive  
Tampa, FL 33617

**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:

Tiffany Rucker

Name

4408 E Tarpon Drive

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

Tampa

FL


33617

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)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

**Name and Address:**

Tiffany Rucker

4408 E Tarpon Drive

Tampa FL 33617

Michael Rucker

4408 E Tarpon Drive

Tampa, FL 33617

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 05/20/2016 (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:**



**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.

Tiffany Rucker

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)**



# Certificate of Registration

Issued Pursuant to Chapter 212, Florida Statutes

DR-11  
R. 10/15

39-8016925296-6	02/26/16
Certificate Number	Registration Effective Date

This certifies that

INSPIRED 2 DESIGN HOME FURNISHINGS  
TIFFANY M. RUCKER  
7415 US HIGHWAY 301 S  
RIVERVIEW FL 33578-4385

has met the sales and use tax registration requirements for the business location stated above and is authorized to collect and remit tax as required by Florida law. This certificate is non-transferable.

**POST THIS CERTIFICATE IN A CONSPICUOUS PLACE**

**THIS IS YOUR SALES & USE TAX CERTIFICATE OF REGISTRATION**  
(DETACH AND POST IN A CONSPICUOUS PLACE)



**THIS IS YOUR FLORIDA ANNUAL RESALE CERTIFICATE FOR SALES TAX**

**Note:** New dealers who register after mid-October are issued annual resale certificates that expire on December 31 of the following year.

**These certificates are valid immediately.**

