

L16000120412

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

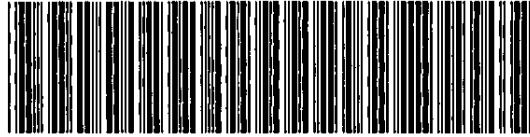
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16 APR 27 AM 11:03

06/28/16

W16-030747



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 3, 2016

CANDICE MARIE BENAVENTE
709 NAUGHTON DR.
CRESTVIEW, FL 32536

*** 2ND CORRECTION ***

SUBJECT: F.A.M.I.L.Y LLC
Ref. Number: W16000030747

RECEIVED
16 JUN 27 PM 3:51
TALLAHASSEE, FLORIDA

We have received your document for F.A.M.I.L.Y LLC and your check(s) totaling \$160.00. 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 existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L14000109253.

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: 816A00008563



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 26, 2016

CANDICE MARIE BENAVENTE
709 NAUGHTON DR.
CRESTVIEW, FL 32536

SUBJECT: F.A.M.I.L.Y LLC
Ref. Number: W16000030747

We have received your document for F.A.M.I.L.Y LLC and your check(s) totaling \$160.00. 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 existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L05000016343.

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: 816A00008563

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16 JUN -2 AM 11:17

STATE
FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The F.A.M.I.L.Y United 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:

Candice Benavente
Name of Person

The F.A.M.I.L.Y United LLC
Firm/Company

709 Naughton Dr
Address

Crestview FL 32536
City/State and Zip Code

cmnorwood1981@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Candice Benavente at (850) 612-5466
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:

~~The F.A.M.I.L.Y. LLC.~~ ^{United United,} h20ur F.A.M.I.L.Y. United 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:

709 Naughton Dr
Crestview
FL 32536

709 Naughton Dr
Crestview
FL 32536

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:

Candice Benavente
Name

709 Naughton Drive
Florida street address (P.O. Box NOT acceptable)

Crestview FL 32536
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.

Candice Benavente
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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SECRETARY OF STATE
16 JUL 27 AM 11:03

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Co Founder

Co Founder

Name and Address:

Candice Benavente
709 Naughton Dr
Crestview FL 32536

Arron Barnes
7915 S Christina
Chicago, IL 60652

(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:

Candice Benavente

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.

Candice Benavente

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)

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 DEPARTMENT OF STATE
 15 JUN 27 2011:08