

L16000124717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

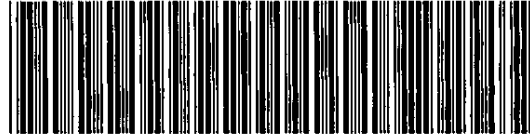
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600287082656

06/21/16--01031--015 \*\*160.00

*Handwritten signature*

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Betty Maclean Travel 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:

Mary Ann Ramsey  
Name of Person  
Betty Maclean Travel LLC  
Firm/Company  
2245 Venetian Court  
Address  
Naples Florida 34109  
City/State and Zip Code  
maryann@bettymacleantravel.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Ann Ramsey      239      513-0333  
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:

Betty Maclean Travel 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:**

2245 Venetian Court  
Naples Florida  
34109

**Mailing Address:**

2245 Venetian Court  
Naples FL  
34109

**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:

Mary Ann Ramsey

Name

2338 Immokalee Rd. Suite 135

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

Naples

Florida

34110

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

Mary Ann Ramsey

**Name and Address:**

2338 Immokalee Rd.

Suite 135

Naples Fl 34110

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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. 17.155, F.S.

Mary Ann Ramsey

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)

Moon, Matthew T.

**L16000124717**

**From:** Mary Ann Ramsey  
**Sent:** Wednesday, July 06, 2016 2:27 PM  
**To:** Moon, Matthew T.  
**Cc:** Roy W Ramsey  
**Subject:** Betty Maclean Travel LLC

To: Matthew T Moon

Regulatory Specialist II

From: Mary Ann Ramsey

President Betty Maclean Travel, Inc.

Subject: Articles of Organization

Betty Maclean Travel LLC

Reference # W16000046118

Date: July 6, 2016

Please be advised that Mary Ann Ramsey is the same individual that is the owner, officer and director of both Betty Maclean Travel, Inc. and Betty Maclean Travel LLC.

Therefore there is no conflict in ownership or claim to either name.

If you have any further questions, please feel free to contact me.

Mary Ann Ramsey

President

Betty Maclean Travel, Inc

2245 Venetian Court

Naples, Florida 34109