## [[6000]62293

(R	equestor's Name)	
(A	ddress)	· · · · · · · · · · · · · · · · · · ·
(A	ddress)	
(C	city/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nar	ne)
(C	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	

Ulluw SSSS

AUG 3 1 2016 T. SCOTT



400287927664

07/25/16--01027--003 \*\*160.00

16 NUC 29 MM II: 40



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 3, 2016

RICHARD G. SANSOVCIE, JR 432 BAREFOOT BLVD BAREFOOT BAY, FL 32976

SUBJECT: RICK'S MOWING BY THE BAY, LLC

Ref. Number: W16000053537

We have received your document for RICK'S MOWING BY THE BAY, 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):

List registered agent.,

The designation of the registered agent must be at a Florida street address.

The registered agent must sign accepting the designation.

Please return 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.

Tyrone Scott Regulatory Specialist II

Letter Number: 716A00016228

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

•

SUBJECT: Rick's Mowing By the Bay, 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:
Richard G. Sansoucie, Jr.
RICK'S Mowing By the Bay, CCC
432 Barefoot Blvd Address
Barefoot Bay FL 32976
MOWING by the bay (a yahoo . Com E-mail aldress to be used for future annual report notification)
For further information concerning this matter, please call:
Rick Sansoucie at 772, 321 - 8072  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$\int_{125.00}^{\$125.00}\$ \text{ Filing Fee} \text{ \$\int_{130.00}^{\$130.00}\$ \text{ Filing Fee & Certified Copy (additional copy is enclosed)}}  \$\int_{155.00}^{\$155.00}\$ \text{ Filing Fee & Certified Copy (additional copy is enclosed)}} \$\int_{155.00}^{\$160.00}\$ \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{155.00}^{\$160.00}\$ \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{155.00}^{\$160.00}\$ \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{155.00}^{\$160.00}\$ \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{155.00}^{\$160.00}\$ \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{155.00}^{\$160.00}\$ \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{155.00}^{\$160.00}\$ \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{155.00}^{\$160.00}\$ \text{ Filing Fee, Certified Copy (additional copy is enclosed)}
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

**ARTICLE II - Address:** 

The name of the Limited Liability Company is:

The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
432 Barefoot Blvd 5AME Barefoot Bay, FL 32974
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:    C
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 the 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)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager  M C7	Rick Sansoucie TV. 432 Barefoot BIVO Barefoot Bay, FL 32974
<del></del>	
EV: Effective date, if other than the dective date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 o
EV: Effective date, if other than the dective date is listed, the date must be of filing.) The date inserted in this block does not ment's effective date on the Department.	specific and cannot be more than five business days prior to or 90 of the meet the applicable statutory filing requirements, this date will not
ective date is listed, the date must be of filing.) The date inserted in this block does not ment's effective date on the Department. EVI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 of the meet the applicable statutory filing requirements, this date will not
E V: Effective date, if other than the dective date is listed, the date must be of filing.)  The date inserted in this block does not ment's effective date on the Department. E VI: Other provisions, if any.  REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90 of the meet the applicable statutory filing requirements, this date will not art of State's records.
E V: Effective date, if other than the dective date is listed, the date must be of filing.) The date inserted in this block does not ment's effective date on the Department.  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a This document is exert I am aware that any ficonstitutes a third degree of the date of	specific and cannot be more than five business days prior to or 90 of the meet the applicable statutory filing requirements, this date will not ent of State's records.  member or an authorized representative of a member. Couted in accordance with section 605.0203 (1) (b), Florida Statutes. Talke information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
E V: Effective date, if other than the dective date is listed, the date must be of filing.) The date inserted in this block does not ment's effective date on the Department.  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a This document is exert I am aware that any ficonstitutes a third degree of the date of	specific and cannot be more than five business days prior to or 90 of the meet the applicable statutory filing requirements, this date will not ent of State's records.  The member of an authorized representative of a member. Secured in accordance with section 605.0203 (1) (b), Florida Statutes, also information submitted in a document to the Department of State.