

L16000166357

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

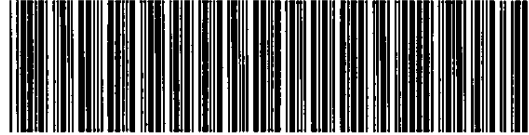
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

2540

Office Use Only



100288909441

08/12/16--01019--006 **125.00

16 SEP -8 PM 2:37
SECRETARY OF STATE
TALLAHASSEE FLORIDA

411 8130/16

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Furniture Liquidators And Hotel Contractors, 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:

Burt, Stephen C

Name of Person

Firm/Company

6260 39th Street North Suite H

Address

Pinellas Park, FL 33781

City/State and Zip Code

steveburt2003@yahoo.com

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

For further information concerning this matter, please call:

Jim Dyce at (407) 228-4488
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2016

STEPHEN C BURT
6260 39TH STREET NORTH SUITE H
PINELLAS PARK, FL 33781

SUBJECT: FURNITURE LIQUIDATORS AND HOTEL CONTRACTORS, LLC
Ref. Number: W16000057755

We have received your document for FURNITURE LIQUIDATORS AND HOTEL CONTRACTORS, LLC and your check(s) totaling \$150.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 116A00017601

6260 39th St, Suite H
Pinellas Park, FL 33781
(407) 228-4488

Furniture Liquidators and Hotel Contractors, LLC

August 9, 2016

RE: Furniture Liquidators and Hotel Contractors, LLC (old)
Doc No: L14000176788

Furniture Liquidators and Hotel Contractors, LLC (new)
Doc No: W16000057755

To whom it may concern,

We recently mailed you one envelope which had dissolution papers for the old Furniture Liquidators and Hotel Contractors, LLC (L14000176788). You filed these articles of dissolution on August 12, 2016. This is what we requested.

Also included in the envelope were articles of organization for a "New" Furniture Liquidators and Hotel Contractors, LLC (W16000057755).

See attached sunbiz detail by entity name reports for both LLC's.

We called your office to determine the problem with the new LLC. We were told that the name was not available.

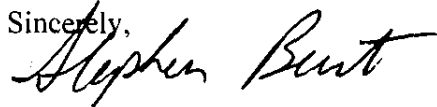
Both LLC's are owned by Stephen C. Burt.

We were told to write to you explaining this and that Mr. Burt has no intention of reactivating the first LLC which was dissolved.

We are requesting that you please complete the processing of the new llc.

If you have any questions or need more information, please do not hesitate to contact me.

Sincerely,



Stephen Burt
Managing Member

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Furniture Liquidators And Hotel Contractors, 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:

6260 39th Street North Suite H
Pinellas Park, Fl 33781

Mailing Address:

6260 39th Street North Suite H
Pinellas Park, Fl 33781

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:

Burt, Stephen C

Name

6260 39th Street North Suite H

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

Pinellas Park, Fl 33781

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.

Stephen Burt

Registered Agent's Signature (REQUIRED)

(CONTINUED)

16 SEP -8 PM 2:37
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

Name and Address:

Burt, Stephen C

6260 39th Street North Suite H

Pinellas Park, FL 33781

(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.817.155, F.S.

Stephen Burt

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)

16 SEP -8 PM 2:37
SECRETARY OF STATE
TALLAHASSEE FLORIDA