

L16000183942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

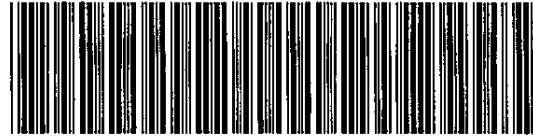
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

LD16-16182

Office Use Only



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09/23/16--01012--004 **130.00

2016 OCT 03 P 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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OCT 04 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 26, 2016

JOEL I. SALAMONE
PO BOX 452741
FORT LAUDERDALE, FL 33345

SUBJECT: STUMPY JOES'S
Ref. Number: W16000066182

We have received your document for STUMPY JOES'S and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

please indicate whether the entity is a Florida or Foreign as you sent both applications.

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) 245-6051.

Tanisha L Washington
Regulatory Specialist II

Letter Number: 416A00020656

Stumpy Joe's LLC



Po Box 452741 Ft Lauderdale, Fl 33345
954-549-0494
stumpyjoes@gmail.com

9/29/2016

Ms. Tanisha Washington,

It was brought to my attention that the LLC for Stumpy Joe's was filled out incorrectly. Attached is the corrected Florida LLC form. The Document number that was assigned is W-16000066182

Also, the LLC name should read as **Stumpy Joe's** as Sunbiz has it as Stumpy Joes's (incorrect). I'm not sure if you need this information too, but I applied for an EIN number. Stumpy Joe's EIN number is 81-3999655.

On article VI page 2 of LLC form, I placed the effective date as 9/26/2016 as Sunbiz has that as the filed date.

Everything else appears to be correct. Please call me if you have any questions.

Thank you,

Joel I Salamone
Owner

2017 OCT -4 AM 8:37
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Stumpy Joe's 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:

Joel I Salamone
Name of Person

Stumpy Joe's LLC
Firm/Company

8096 NW 96th Ter 106
Address

Tamara, FL 33321
City/State and Zip Code

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

For further information concerning this matter, please call:

Joel Salamone at (954) 549 0494
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy (additional copy is enclosed) |
|--|---|---|--|

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration 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:

Stumpy Joe's 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:

8096 NW 96th Ter
Apt 106
TAMARAC FL 33321

Mailing Address:

PO BOX 452741
Sunrise FL 33345

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:

Joel Salomone
Name

8096 NW 96th Terr 106
Florida street address (P.O. Box **NOT** acceptable)

TAMARAC FL 33321
City 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..

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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TALLAHASSEE, FLORIDA

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 9/26/16 (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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Soel Salame

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)

FILED
2016 OCT -3 P 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA