

216000198147

(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



000291657500

FILED
OCT 28 AM 9 19

000291657500
10/28/16--01005--013 **155.00

RECEIVED
DEPARTMENT OF REVENUE
16 OCT 28 AM 11:54

C. GOLDEN

OCT 31 2016

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FOREVER MEMORIES P.B., LLC

Signature _____

Requested by: BA

10/28/16

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ ✓ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ ✓ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

16 OCT 28 AM 9:19
FILED

ARTICLES OF ORGANIZATION
OF
FOREVER MEMORIES P.B., LLC

FILED
16 OCT 28 AM 9:19

I, the undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes (hereinafter "the Act"), hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be FOREVER MEMORIES P.B., LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address of the principal office of the Company shall be 2739 Tally Ho Avenue, Orlando, Florida 32826. The street address of the principal office of the Company shall be 2739 Tally Ho Avenue, Orlando, Florida 32826.

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE,
& REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent of the Company are: GEOFFREY C. MOEHL II, 2739 Tally Ho Avenue, Orlando, Florida 32826.

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 in Chapter 605, F.S.


Registered Agent's Signature

ARTICLE IV - MANAGER

The name and address of each person authorized to manage and control the Company are: GEOFFREY C. MOEHL II, Authorized Member, 2739 Tally Ho Avenue, Orlando, Florida 32826.

ARTICLE V - EFFECTIVE DATE; DURATION

The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The Company shall have perpetual existence, unless the Company is earlier dissolved as provided in these Articles of Organization, the Company's Operating Agreement, or the Act.

IN WITNESS WHEREOF, I, the undersigned, have made and have signed these Articles of Organization and have acknowledged them to be my act this 28 day of OCTOBER, 2016.

Geoffrey C. Moehl II
GEOFFREY C. MOEHL II
(Signature of 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 section 817.155, F.S.

GEOFFREY C. MOEHL II
Typed or printed name of signee

FILED
16 OCT 28 PM 3:18