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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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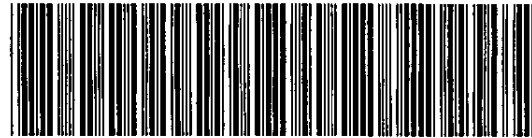
(Business Entity Name)

(Document Number)

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16 DEC -7 PM 1:58

SECRETARY OF STATE
DIVISION OF CORPORATIONS
AND BUSINESSES

M. MOON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 15, 2016

MELISSA M. QUINTERO
2751 GRANADA BLVD
KISSIMMEE, FL 34746

SUBJECT: SMITH FAMILY ENTERPRISES, LLC
Ref. Number: W16000077220

We have received your document for SMITH FAMILY ENTERPRISES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is incomplete/missing pages. Please resubmit the whole document in order for our department to process your request.

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.

Matthew T Moon
Regulatory Specialist II

Letter Number: 916A00024442

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SECRET
STATE
OFFICE
TALLAHASSEE, FLORIDA

16 DEC -7 PM 3:19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Smith Family Enterprises, 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:

Melissa M. Quintero
Name of Person

Smith Family Enterprises, LLC
Firm/Company

2751 Granada Blvd.
Address

Kissimmee FL 34746
City/State and Zip Code

curtis-smith-5@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa M. Quintero (401) 663-1412
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

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Smith Family Enterprises, 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:

2751 Granada Blvd.
Kissimmee, FL 34746

Mailing Address:

2751 Granada Blvd.
Kissimmee, FL 34746

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:

Melissa M. Quintero
Name
2751 Granada Blvd.
Florida street address (P.O. Box **NOT** acceptable)
Kissimmee FL 34746
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.

Melissa Quintero
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

AMBR

AMBR

Name and Address:

Melissa M. Quintero
2751 Granada Blvd.
Kissimmee, FL 34746

Curtis B. Smith
2751 Granada Blvd.
Kissimmee, FL 34746

(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:

Melissa Quintero

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.

Melissa M. Quintero

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)

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STATE
RECORDS
DIVISION