

L170000104685

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FILED  
17 MAY 11 AM 11:26  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

no 5/12/17

**Starr Creations, LLC**  
Aaron Starr, MGR  
611 W. Martin Luther King Blvd.  
Plant City, FL 33563

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May 8, 2017

Division of Corporations  
Amendment Section  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Document #: L14000012639**  
**Starr Creations, LLC**

To Whom It May Concern:

Please let this letter serve as proof that we have no intention of revoking the dissolution of the limited liability corporation, Starr Creations, LLC, therefore releasing the name for use to another entity.

If you require any further information in order to process this request, please contact my CPA, Ron Porat, at 6702 N Gunlock Ave, Tampa, FL 33614. He can be reached via phone at 813-870-0060.

Sincerely,

A handwritten signature in black ink, appearing to be 'AS', written over a horizontal line.

Aaron Starr, Manager  
Starr Creations, LLC

AS/db

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** STARR CREATIONS, 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:

AARON STARR

Name of Person

STARR CREATIONS, LLC

Firm/Company

611 W MARTIN LUTHER KING BLVD.

Address

PLANT CITY, FL 33563

City/State and Zip Code

ARU.TOMICA@GMAIL.COM

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

For further information concerning this matter, please call:

AARON STARR

813

943-6932

at ( )

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

STARR CREATIONS, LLC

(Must contain 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:**

611 W MARTIN LUTHER KING BLVD  
PLANT CITY, FL 33563

**Mailing Address:**

611 W MARTIN LUTHER KING BLVD  
PLANT CITY, FL 33563

**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:

AARON STARR

Name

2008 BERRY LAKE DRIVE

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

BRANDON

FL

33510

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..*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

MGR

**Name and Address:**

AARON STARR

2008 BERRY LAKE DRIVE

BRANDON, FL 33510

AMBR

WILLIAM ERIC LONG

2008 BERRY LAKE DRIVE

BRANDON, FL 33510

AMBR

TROY NOONAN

2008 BERRY LAKE DRIVE

BRANDON, FL 33510

(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.

AARON STARR

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 MAY 11 AM 11:26

**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)