

L17000/30661

(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



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06/15/17--01005--001 **155.00

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FIDELITY & SWEENEY
FIDELITY & SWEENEY, FLORIDA

17 MAY 15 PM 3:31

FILED

06/16/17

Marie C. Chery
Chery's Blinds & Interiors, LLC.
751 Northwest 37 Street
Oakland Park, Florida 33309
954-563-4545

June 12, 2017

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

Dear Sirs:

Reference: Filing For New LLC.


Enclosed please find my application for a business that I am starting here in the City of Oakland Park, Florida.

Enclosed also, is a Money order in the amount of \$155.00, which is the fee for the Filing Fee and a certified copy of the paperwork.

After all of the processing has been completed, please return the documents to me at my address listed above. And, should you need any additional information, I can be reached at the address also.

Thank you for your assistance in this matter.

Sincerely,

Marie C. Chery


Marie C. Chery

RECEIVED
17 JUN 14 PM 4:54
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Chery's Blinds & Interiors, 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:

Ms. Marie C. Chery

Name of Person

Chery's Blinds & Interiors, LLC.

Firm/Company

751 Northwest 37 Street

Address

Oakland Park, Florida 33309

City/State and Zip Code

NA

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

For further information concerning this matter, please call:

Rosie Louver at (954) 548-8229

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:

Chery's Blinds & Interiors, 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:

4300 N.E. 5 Avenue
Oakland Park, FL 33334

Mailing Address:

Same as Office Address.

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:

Marie C. Chery
Name
4300 N.E. 5 Avenue
Florida street address (P.O. Box **NOT** acceptable)
Oakland Park, FL 33334
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.

Marie C. Chery
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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DEPARTMENT 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:

Marie C. Chery
751 N. W. 37 Street
Oakland PK, FL 33309

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 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:

Marie C. Chery
Marie C. Chery

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.

MARIE C. CHERY
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
17 MAY 15 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA