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Office Use Only

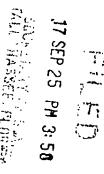
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# FLORIDA DEPARTMENT OF STATE Division of Corporations

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August 31, 2017

17 SEP 26 PM 3: 57

STATE WAS OF STATE
MALLANDSSEE, FLORESA

CHRISTY HERRINGTON 9664 QUAIL TRAIL JUPITER, FL 33478

SUBJECT: HERRINGTON ENTERPRISES, LLC

Ref. Number: W17000071772

We have received your document for HERRINGTON ENTERPRISES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is.

P000000080598

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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 917A00018055

RECEIVED

17 SEP 25 PH 3: 55

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# FLORIDA DEPARTMENT OF STATE Division of Corporations

July 14, 2017

CHRISTY HERRINGTON 9664 QUAIL TRAIL JUPITER, FL 33478

SUBJECT: HERRINGTON ENTEPRISES, LLC

Ref. Number: W17000058314

17 SEP 25 PM 3: 58

We have received your document for HERRINGTON ENTEPRISES, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted the document and fees to form a Florida corporation; however, your name implies you wish to form a limited liability company. The name of a corporation cannot contain a limited liability company suffix. Limited Liability Company, L.L.C. and LLC are all limited liability company suffixes. The name of a corporation must contain Corporation, Corp., Incorporated, Inc., Company or Co.

Please correct the suffix or, if you wish to form a limited liability company, submit "Articles of Organization" along with the additional fee(s). Any fees previously submitted with your corporate filing will be applied to your limited liability company filing.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 717A00014288

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

RECENTED 17 AUG 28 PM 2:37

## **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: HEREINGTON OPERATIONS, 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:
CHERSTY HERRENGTON Name of Person
HEREINGTON ODERATIONS, LLC Firm/Company
9664 QUAL TRAIL Address
Jupiter, FL 33478  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CHRESTYHORRUNGTON at (561) 193 · 9970  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} S155.00 Filing Fee & Certificate of Status &
Moiling Address Street Address

#### 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:

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(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	AULSHASSEE, FLORED
ARTICLE H - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
9664 QUAIL TR JUPITRE, FL 32478 JUPITRE, FL 33478	<del></del>
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:  (HPSTY HOLEIN GTON)  Name	
Florida street address (P.O. Box NOT acceptable)	
Jupiter FL: 33478 City State Zip	
Having been numed as registered agent and to accept service of process for the above stated limited liability compan place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capa further agree to comply with the provisions of all statutes relating to the proper and complete performance of my dut am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S	city. I
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: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR MER M6R (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: \_ (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.

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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