

L17090210048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

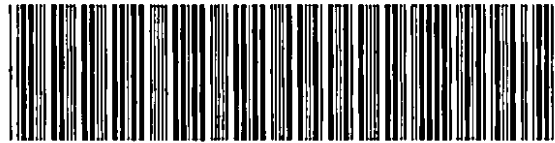
(Business Entity Name)

(Document Number)

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03/01/17--01018--005 **125.00

17 SEP 25 AM 11:59
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: DRIVER, 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:

MANNY FAIRSTEIN
Name of Person

DRIVER, LLC
Firm/Company

11332 SW 18TH COURT
Address

MIRAMAN, FL 33025
City/State and Zip Code

LOB09746@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MANNY FAIRSTEIN at (305) 490-0030
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 5, 2017

MANNY FAINSTEIN
11332 SW 18TH CT
MIRAMAR, FL 33025

SUBJECT: DRIVER, LLC
Ref. Number: W17000072409

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and resubmit the **complete document**, including the electronic filing cover sheet.

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.

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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 717A00018287

*AMENDED NAME
TIMELY DRIVER, LLC*

PLEASE SEE ARTICLES OF ORGANIZATION ATTACHED

*THANKS
MANNY*

FLORIDA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS
AND COMMERCIAL
INFORMATION SERVICES

17 SEP 25 PM 3:55

RECEIVED

0/05/17 CORPORATE DETAIL RECORD SCREEN 8:45 AM
JM: P17000027866 ST:FL ACTIVE/FL PROFIT FLD: 03/27/2017 EFF: 03/24/2017
AME : THE DRIVER'S CORPORATION
RINCIPAL: 10940 NORTH ASTER AVENUE
DDRESS TAMPA, FL 33612 US
A NAME : PEREZ NUNEZ, LEYDI C
A ADDR : 10940 NORTH ASTER AVENUE
TAMPA, FL 33612 US
NN REP : * NONE FILED *

MENU, 3. OFFICERS, 7. LIST, 8. NEXT, 9. PREV

TER SELECTION AND CR:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TIMELY DRIVER, 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:

11332 SW 18TH COURT
MIRAMAN, FL 33025

Mailing Address:

SAME

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:

MANNY FAINSTEIN

Name

11332 SW 18TH COURT

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

MIRAMAN FL 33025

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..

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

17 SEP 25 AM 11:59
CLERK 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

AMBR

Name and Address:

11332 SW 18th COURT
MIRAMAR, FL 33025

AMBR MANNY FAUSTEIN

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Aug 29 2017 (OPTIONAL)

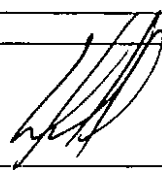
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

N/A

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.

MANNY FAUSTEIN

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)