

L17000219380

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

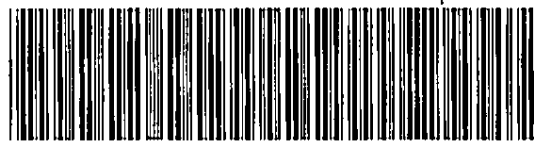
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 OCT 23 AM 10:31



Losavio & DeJean, LLC Attorneys At Law

"Guiding You Through Changes in Life"
EST 1976

October 20, 2017

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

RE: Smith Winddancer, LLC
Our File No.: 49-728

Dear Sir/Madam,

Enclosed please find, the original Cover Letter and Articles of Organizations to be filed in regards to the above referenced matter. Also enclosed is our firm check bearing check no. 6443 in the amount of \$130.00 for filing costs related to this matter.

Should you have any questions, please feel free to contact me. I remain,

Very Truly Yours,

LOSAVIO & DEJEAN, LLC

Veleka Evans
Legal Assistant to
Kent S. DeJean
/vae
Enclosures

PETER J. LOSAVIO, JR. **
KENT S. DEJEAN+
*Certified Elder Law Attorney
By National Elder Law Foundation
†A Professional Law Corporation
+Accredited by the Department of Veterans Affairs



COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Smith WINDDANCER, L.L.C.
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:

KENT S. DETEAN
Name of Person

LOSAU.0 + DETEAN LLC
Firm/Company

8414 BLUEBONNET BLVD, SUITE 110
Address

BATON ROUGE, LA 70810
City/State and Zip Code

KDETEAN@LOSAU-0LAW.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KENT S. DETEAN at (225) 769-4200
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:

SMITH WINDDANCE L.L.C.
(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:

16557 STRAIN ROAD
BATON ROUGE, LA 70816

Mailing Address:

16557 STRAIN ROAD
BATON ROUGE, LA 70816

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:

JAMES RAY SMITH
Name
162 WINDDANCE LANE
Florida street address (P.O. Box ~~NOT~~ acceptable)
M. RAMAK BEACH FL 32550
City State Zip

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

James R. Smith
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

MGR

Am BR

Am BR

Name and Address:

JAMES RAY Smith
16557 STAN ROAD
BATON ROUGE, LA. 70816

JAMES RAY Smith
16557 STAN ROAD
BATON ROUGE, LA. 70816

TRUDY Smith
16557 STAN ROAD
BATON ROUGE, LA. 70816

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: N/A (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.

JAMES RAY SMITH

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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TALLAHASSEE FLORIDA