# 117000233081

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<del>ý</del> )
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	<del>)</del>
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
00623		}

Office Use Only



500315241485

07/02/18--01033--006 \*\*25.00

295 AUG 20 FH 3: NO

T. CLINE
AUG 23 700 (S

EXAMINER



July 10, 2018

LISA DAWN ARWOOD LLC 1051 HILLSBORO MILE 708 E HILLSBORO BEACH, FL 33062

SUBJECT: LISA DAWN ARWOOD LLC

Ref. Number: L17000233081

We have received your document for LISA DAWN ARWOOD LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

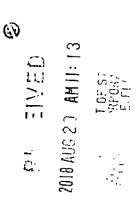
Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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) 245-6051.

Brittany M Figueroa Regulatory Specialist II Registration/Qualification Section

Letter Number: 818A00014201



### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: LISA DAWN AF	RWOOD LLC	
	Name of Limited Liabilit	у Сотралу
Dear Sir or Madam:		
The enclosed Statement of Correction and fee(s)	are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
LISA DAWN ARWOO	D	
Name of Person		
Firm/Company		
1051 HILLSBORO MI	LE #708E	
Address		
HILLSBORO BEACH, F	L 33062	
City/State and Zip Code		
LISA.ARWOOD@GM	AIL.COM	
E-mail address: (to be used for future annu	al report notification)	
For further information concerning this matter, p	please call:	
LISA ARWOOD	<sub>31/</sub> 321 \	945-4061  Daytime Telephone Number
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	Shows the second state of States & Certificate Copy

CR2E062 (9/15)

#### STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: LISA DAWN ARWOOD LLC The Florida Document number of the limited liability company is: L17000233081 SECOND: THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT [x]Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: EFFECTIVE DATE 01/01/2018 <u>OR</u>  $\Box$ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u>  $\Box$ The electronic transmission of the record was defective. Signature of Authorized Representative

Signature of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent's Signature

Filing Fee: Certified Copy: \$25.00

\$30.00 (optional)

## Electronic Articles of Organization Florida Limited Liability Company

L17000233081 FILED 8:00 AM November 10, 2017 Sec. of State

#### Article I

The name of the Limited Liability Company is: LISA DAWN ARWOOD LLC

#### Article II

The street address of the principal office of the Limited Liability Company is:

1051 HILLSBORO MILE 708 E HILLSBORO BEACH, FL. 33062

The mailing address of the Limited Liability Company is:

1051 HILLSBORO MILE 708 E HILLSBORO BEACH, FL. 33062

#### Article III

The name and Florida street address of the registered agent is:

LISA D ARWOOD 1051 HILLSBORO MILE 708 E HILLSBORO BEACH, FL. 33062

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.

Registered Agent Signature: LISA D ARWOOD

#### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: AR LISA D ARWOOD 1051 HILLSBORO MILE 708 E HILLSBORO BEACH, FL. 33062 L17000233081 FILED 8:00 AM November 10, 2017 Sec. Of State

#### Article V

The effective date for this Limited Liability Company shall be:

11/10/2017

Signature of member or an authorized representative

Electronic Signature: LISA D ARWOOD

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.