

L17000240911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

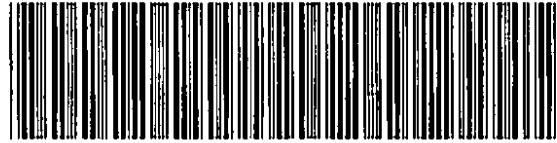
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF DISTRICT COURT
JANUARY 17, 2017

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November 6, 2017

Florida Division of Corporations
New Filing/Amendment Section
PO Box 6327
Tallahassee, FL 32314

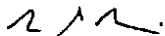
RE: Dissolution of YOGEEASY, INC., Formation of YOGEEASY, LLC

Dear Gentlemen/Ladies:

I represent Thomas W. Delattre who is starting a new business with Michael Izzolo, President of YOGEEASY, INC., a Florida corporation (collectively known as the "Parties"). The Parties intend to dissolve YOGEEASY, INC., and create a new limited liability company of the same name, YOGEEASY, LLC. The Parties are in agreement as to this course of action and wish for the dissolution of YOGEEASY, INC. to occur directly before the creation of YOGEEASY, LLC so that they can be sure to retain the business name. Enclosed are the Articles of Dissolution for YOGEEASY, INC. and the Articles of Organization for YOGEEASY, LLC to be filed in accordance with the Parties' wishes.

If there are any questions or issues with this request, please contact me.

Sincerely,



Raymond G. Robison

RGR:pwg

Enclosures

CC: Thomas W. Delattre

Michael Izzolo, President of YOGEEASY, INC.

I approve the use of the name of YOGEEASY, LLC and wish for the dissolution of YOGEEASY, INC. to occur directly before the creation of YOGEEASY, LLC.

YOGEEASY, INC., a Florida corporation

By: 

MICHAEL IZZOLO, President

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: YOGEASY, 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:

Raymond G. Robison

Name of Person

Fox, Wackeen, et. al.

Firm/Company

3473 SE Willoughby Blvd.

Address

Stuart, FL 34994

City/State and Zip Code

t.delattre@att.net

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

For further information concerning this matter, please call:

Raymond G. Robison 772 287-4444
Name of Person at () 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:

YOGEASY, 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:

Mailing Address:

3721 Doubleton Drive
Stuart, FL 34997

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Stuart, FL 34997

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:

Raymond G. Robison

Name

3473 SE Willoughby Blvd.

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

Stuart, FL 34994

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.

R. G. Robison

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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NOTARIES PUBLIC
STATE OF 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:

Thomas W. Delattre

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the 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.

This is a manager managed limited liability company and the initial manager is Thomas W. Delattre.

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.

Raymond G. Robison, Authorized Representative of Member

Typed or printed name of signer

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)