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TALLAHASSEE, FLORIDA

D O'KEEFE
FEB 05 2018

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Baron Christopher Creative, 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:

David E. Klein, Esq.

Name of Person

Rabideau Law, P.A.

Firm/Company

400 Royal Palm Way, Suite 404

Address

Palm Beach, FL 33480

City/State and Zip Code

dklein@rabideau-law.com

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

For further information concerning this matter, please call:

David Klein

561

655-6221

at (_____) _____

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

Emilie Dulles, LLC
1016 Clair Street, Building 5
West Palm Beach, Florida 33401

December 26, 2017


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

To Whom It May Concern:

Although Emilie Dulles, LLC, a Florida limited liability company, is the holder of the fictitious name, "Baron Christopher Creative," this letter shall hereby allow Baron Christopher Hanson to form the limited liability company, "Baron Christopher Creative, LLC, a Florida limited liability company."

Sincerely,

Emilie Dulles, LLC, a Florida
limited liability company

By: 

Emilie P. Dulles
Its: Manager

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Baron Christopher Creative, 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:

400 Royal Palm Way, Suite 404
Palm Beach, FL 33480

Mailing Address:

400 Royal Palm Way, Suite 404
Palm Beach, FL 33480

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:

David Klein

Name

400 Royal Palm Way, Suite 404

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

Palm Beach

Florida

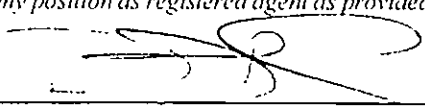
33480

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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

MGR

Name and Address:

Baron Christopher Hanson

400 Royal Palm Way, Suite 404

Palm Beach, Florida 33480

(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.

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.

David Klein

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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