

L18000031739

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 FEB -5 PM 10:23

N CULLIGAN

DEC 8 2017

COVER LETTER

TO: New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
(850) 245-6052

SUBJECT: Dunedin, 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:

Kathryn A. Carlson

Name of Person

927 Highland Ave

Address

Dunedin, FL 34698

City/ State and Zip

DunedinKellys@gmail.com

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

For further information concerning this matter, please call:

Kathryn A. Carlson

at (727)

420-2232

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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 8, 2017

KATHRYN A CARLSON
927 HIGHLAND AVE
DUNEDIN, FL 34698

SUBJECT: HIGHLAND HOUSE, LLC
Ref. Number: W17000097256

We have received your document for HIGHLAND HOUSE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

- ☛ 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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 817A00024810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is: Funedin, LLC

ARTICLE II - ADDRESS

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


Funedin, LLC.
927 Highland Ave.
Dunedin, FL 34698

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE**

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

Kathryn A. Carlson
927 Highland Ave.
Dunedin, FL 34698

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..


Kathryn A. Carlson,
Registered Agent

FILED
18 FEB -5 PM 1:24
CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF DUDELL, FLORIDA

ARTICLE IV- MANAGERS OR MANAGING MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"MGR" = Manager

"MGMR" = Managing Member

MGMR

Kathryn A. Carlson
927 Highland Ave.
Dunedin, FL 34698

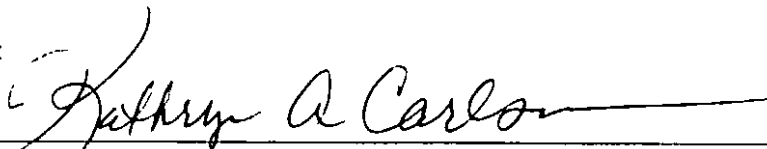
MGMR

Daniel D. Carlson
927 Highland Ave.
Dunedin, FL 34698

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be upon filing.

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.

Kathryn A. Carlson

Typed or printed name of signee

18 FEB -5 PM 4:24