

L18000065689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

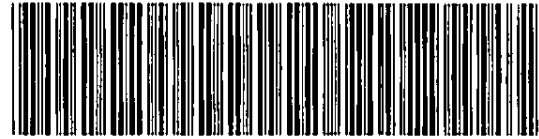
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2018 MAR 15 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 15 2018

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iFloridaDivorce.com

DAYTONADIVORCE.COM



DOUGLAS KNELLER, P.A.
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THÉRÈSE MISITA TRUELOVE, P.A.
PH 386 / 254-8603
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RETIRED JUDGE C. DAVID HOOD
OF COUNSEL

February 23, 2018

Department of State
Division of Corporations
Amendment Section
P.O. Box 6327
Tallahassee, FL 32314

RE: iFloridaDivorce.com, LLC
Tracking Number: 200309544552
Document Number: W18000018294

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

Pursuant to communications received from your office on February 23, 2018, please be advised that Douglas A. Kneller and Therese Misita Truelove are the Officers of iFloridaDivorce.com, Inc. as well as the forming managers of iFloridaDivorce.com, LLC. We are merely forming an LLC to take the place of our corporation formed initially.

We have enclosed the printed Articles of Organization and a check in the amount of \$125.00 for the cost of filing this LLC. Please let us know if further information or documentation is needed.

Thank you.



Douglas A. Kneller



Therese Misita Truelove

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: iFloridaDivorce.com, 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:

Therese Misita Truelove

Name of Person

iFloridaDivorce.com, Inc.

Firm/Company

PO Box 15228

Address

Daytona Beach, Florida 32115

City/State and Zip Code

tmtruelove@daytonadivorce.com

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

For further information concerning this matter, please call:

Therese Misita Truelove

386

257-4699

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

iFloridaDivorce.com, 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:

1112 Riverside Drive

Holly Hill, Florida 32117

PO Box 15228

Daytona Beach, Florida 32115

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:

Therese Misita Truelove

Name

1112 Riverside Drive

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

Holly Hill

FL

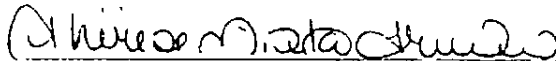
32117

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 _____

MGR _____

Name and Address:

Douglas A. Kneller

1112 Riverside Drive

Holly Hill, FL 32117

Therese Misita Truelove

1112 Riverside Drive

Holly Hill, FL 32117

(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.

Therese Misita Truelove

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)