

L18000081250

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

APR 6 2018

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Key Partners, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fees) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joan Dunham-Card  
Name of Person

Firm/Company

431 Onager Court  
Address

Englewood, Florida 34223  
City/State and Zip Code

dunhamcard@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joan Dunham-Card (519) 527-0558  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 28, 2018

JOAN DUNHAM-CARD  
931 ONAGER COURT  
ENGLEWOOD, FL 34223

SUBJECT: G G PARTNERS LLC  
Ref. Number: W18000025955

We have received your document for G G PARTNERS LLC and your check(s) totaling \$160.00. 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](http://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."

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: 718A00005422

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

6 Partners, LLC  
~~Key Partners, 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:

931 Orager Ct Englewood FL 34223 - Same

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:

Jean Durham-Card  
Name

931 Orager Court  
Florida street address (P.O. Box ~~NOT~~ acceptable)

Englewood, FL 34223  
City State Zip

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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..

Jean Durham-Card  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

AMBR" = Authorized Member

MGR" = Manager

AMBR/Mgr

AMBR

AMBR

Name and Address:

Joan L. Dunham-Card, Mgr  
Douglas A. Card

Charles C. Dunham III  
Michelle A. Dunham

Marylou Cappellano  
James Yankers

(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:**

Joan L. Dunham-Card

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.

-Joan L. Dunham-Card

Typed or printed name of signee

**Filing Fees:**

\$25.00 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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TALLAHASSEE, FLORIDA

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