

L18000204395

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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AUG 27 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. PAGE

AUG 28 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
2018 AUG 27 AM 11:44

REGISTRATION UNIT

August 10, 2018

RICHARD RICCIARDI  
4575 VIA ROYALE STE 200  
FORT MYERS, FL 33919

SUBJECT: S & S HOMES, LLC  
Ref. Number: W18000072642

We have received your document for S & S HOMES, 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.

One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Keyna E Page  
Regulatory Specialist II

Letter Number: 818A00016523

Date: 08/16/2018

To the Division of Corporations:

Reference: S & S HOMES, LLC Doc # L10000041141

Dear Department,

It has come to my attention that my company's annual report has not been filed and my company has been dissolved. As the owner of S & S HOMES, LLC I would like to at this time release my document number L10000041141

I am enclosing a new set of articles to be filed with the state. Thank you in advance with your help in this matter.

Regards:

A handwritten signature in cursive script that reads "Susan M. Laurie". The signature is written in dark ink and is positioned above the printed name.

SUSAN LAURIE

OBO: S & S HOMES, LLC

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** S & S HOMES, 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:

RICHARD RICCIARDI

Name of Person

Firm/Company

4575 VIA ROYALE STE 200

Address

FORT MYERS, FL 33919

City/State and Zip Code

LEGAL@YOUR-ADVOCATES.ORG

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

For further information concerning this matter, please call:

RICHARD RICCIARDI      239      689-1096  
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:

S & S HOMES, 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:

203 SE 23RD TER  
CAPE CORAL, FL 33990

Mailing Address:

203 SE 23RD TER  
CAPE CORAL, FL 33990

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:

RICHARD RICCIARDI

Name

4575 VIA ROYALE STE 200

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

FORT MYERS

FL

33919

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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**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:**

SUSAN LAURIE

203 SE 23RD TER

CAPE CORAL, FL 33990

(Use attachment if necessary)

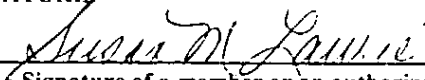
**ARTICLE V:** Effective date, if other than the date of filing: 07/16/2018. (OPTIONAL)

(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.

SUSAN LAURIE

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)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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