

L190001300H

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

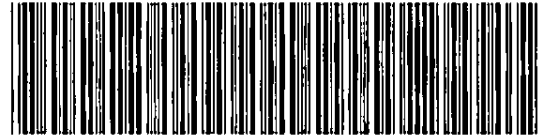
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/13/13--01052-- 025 **160.00

FILED
19 MAY 13 AM 10:53
SECURITY CODE
TALLAHASSEE, FLORIDA

N CULLIGAN

MAY 22 2013



MITCHELL D. ADLER, P.A.
ATTORNEY AT LAW

6919 SW 18th Street
Suite 201
Boca Raton, FL 33433

T: 561.372.2390
F: 561.757.5698
mitch@adlerlawfl.com

May 9, 2019

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

New LLC Filing:
HOME IS HEART CONSTRUCTION COMPANY, LLC

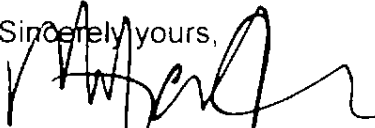
Please find enclosed Articles of Organization for HOME IS HEART CONSTRUCTION COMPANY, LLC.

I am also enclosing my law firm check in the amount of \$160.00 payable to Florida Department of State for the following:

\$125.00 filing fee for Articles of Organization and Designation of Registered Agent;
\$30.00 Certified copy;
\$5.00 Certificate of Status

Total \$160.00

Should there be any questions, or if any further information is required, please contact the undersigned.

Sincerely yours,

MITCHELL D. ADLER, P.A.

Home is Heart Construction Company, LLC

COVER LETTER

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

SUBJECT: Home is Heart Construction Company, 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:

Susan Sitthigarana

Name of Person

Home is Heart Construction Company, LLC

Firm/Company

10267 Boca Bend West G4

Address

Boca Raton, Florida 33428

City/State and Zip Code

pupae78@gmail.com

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

For further information concerning this matter, please call:

Mitch Adler Attorney

561

372-2390

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:

Home is Heart Construction Company, 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:

10267 Boca Bend West G4

Boca Raton, Florida 33428

Mailing Address:

10267 Boca Bend West G4

Boca Raton, Florida 33428

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:

Susan Sitthigarana

Name

10267 Boca Bend West G4

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

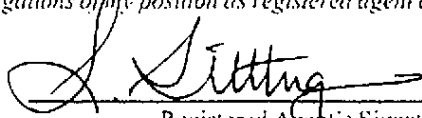
BBoca Raton, Florida 334

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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SECRETARY OF STATE
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~~ AMBR

~~MGR~~ AMBR

Name and Address:

Susan Sitthigarana

10267 Boca Bend West G4

Boca Raton, Florida 33428

Daniel Wayne Goodwin

10267 Boca Bend West G4

Boca Raton, Florida 33428

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19 MAY 13 AM 10:54
CLERK OF CIRCUIT COURT
ALLAHBACH, FLORIDA

(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.

Susan Sitthigarana

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)