

# L19000236751

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

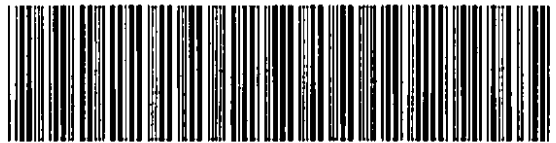
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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19 SEP 11 PM 03:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 24, 2019

AIMEE KORNETTI  
10892 2ND AVE GULF  
MARATHON, FL 33050

SUBJECT: BIKE MARATHON BIKE RENTAL, LLC  
Ref. Number: W19000086177

We have received your document for BIKE MARATHON BIKE RENTAL, 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 a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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.

Marti Simmons  
Regulatory Specialist II

Letter Number: 519A00019724

**COVER LETTER**

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

**SUBJECT:** BIKE MARATHON BIKE RENTAL, 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:

AIMEE KORNETTI

Name of Person

Firm/Company

10892 2nd Avenue Gulf

Address

Marathon, Florida 33050

City/State and Zip Code

bikemarathonbikerentals@gmail.com

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

For further information concerning this matter, please call:

Aimee Kornetti

305

600-9726

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:

BIKE MARATHON BIKE RENTAL, 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:**

10892 2nd Avenue Gulf  
Marathon, Florida 33050

**Mailing Address:**

10892 2nd Avenue Gulf  
Marathon, Florida 33050

**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:

Aimee Kornetti

Name

10892 2nd Avenue Gulf

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

Marathon

Florida

33050

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.*

Aimee Kornetti

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

**Name and Address:**

Aimee Kornetti

10892 2nd Avenue Gulf

Marathon, Florida 33050

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: September 10, 2019. (OPTIONAL)

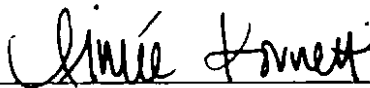
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.

Aimee Kornetti

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)

**BIKE MARATHON BIKE RENTAL, INC.**

P.O. Box 501834  
MARATHON, FLORIDA 33050  
TELEPHONE (305) 743-3204  
[BIKEMARATHONBIKERENTAL.COM](http://BIKEMARATHONBIKERENTAL.COM)

August 27, 2019

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Cir.  
Tallahassee, FL 32301

Gentlemen:

Re: Dissolution and Release of Corporate Name

The purpose of this correspondence is to release the name "Bike Marathon Bike Rental, Inc." upon dissolution of the above referenced corporation to Aimee Kornetti so that she may form a new corporation using said name. Articles of Dissolution are enclosed with this correspondence along with Articles of Incorporation for Ms. Kornetti's new corporation.

If you have any questions or require anything further with respect to this matter, please call me.

Very truly yours,



William R. Cooper  
President and Sole Shareholder

CBW/MSA

**L19000236751**