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(Requestor's Name) (Address) (Address)	000340255690
(City/State/Zip/Phone #)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	02/13/2001011025 ★★125.00
Special Instructions to Filing Officer:	
Office Use Only	
EAR 0 3 2020 T. SCOTT	

## COVER LETTER

## TO: Registration Section Division of Corporations

SUBJECT: <u>Gilded Peacock Enterprises, LLC</u> 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:

Rebecca A. Faunce, DMD

Name of Person

Gilded Peacock Enterprises, LLC

Firm/Company

3108 Coastal Hwy

Address

St. Augustine, FL 32084

City/State and Zip Code

raidmd@bellsouth.net E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Rebecca A, Faunce, DMD
 at (.904)
 806-3336

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

S125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

#### AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Gilded Peacock Enterprises, LLC
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(Must end with 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:
3108 Coastal Hwy	3108 Coastal Hwy
St. Augustine, FL 32084	St. Augustine, FL 32084

### 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:

Rebecca A. Faunce, DMD\_\_\_\_\_\_ Name

3108 Coastal Hwy Florida street address (P.O. Box <u>NOT</u> acceptable)

St. Augustine FL 32084 City 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)

Page 1 of 2

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Gilded Peacock Enterprises, LLC 3108 Coastal Hwy St. Augustine, FL

# **INITIAL LIST OF MEMBERS**

The following named person(s) shall constitute the initial members of Gilded Peacock Enterprises, LLC:

Rebecca A. Faunce, DMD 3108 Coastal Hwy St. Augustine, FL 32084

1.

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Robert William O'Leary 3108 Coastal Hwy St. Augustine, FL 32084

Cheryl Erwin Gillespie 508 N. Point Road St. Augustine, FL 32084

John F. Gillespie, Jr. 508 N. Point Road St. Augustine, FL 32084

an ~2 Rebecca A. Faunce, DMD, Organizer

2-9-2020

. . . . . . .

Date