

20000106367

(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

K PAGE

APR 21 2020



400341179904

03/02/20--01017--019 **125.00

FILED
2020 APR 21 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 27, 2020

MARIE F FRANCOIS
331 NE 150 STREET
MIAMI, FL 33161

SUBJECT: VARIETY STORE PLUS MULTI SERVICE, L.L.C.
Ref. Number: W20000027904

We have received your document for VARIETY STORE PLUS MULTI SERVICE, L.L.C. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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: 720A0000673

20 APR 21 PM 4:30
ONE
10165
10165



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 17, 2020

MARIE F FRANCOIS
331 NE 150 STREET
MIAMI, FL 33161

SUBJECT: VARIETY STORE PLUS MULTI SERVICE, L.L.C.
Ref. Number: W20000027904

We have received your document for VARIETY STORE PLUS MULTI SERVICE, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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: 420A00005792

2020 MAR 26 AM 11:19



COVER LETTER

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

SUBJECT: Variety Store Plus Multi Services, L.L.C

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:

Marie F. Francois

Name of Person

Variety Store Plus Multi Service, L.L.C.

Firm/Company

331 NE 150 Street

Address

Miami Florida, 33161

City/State and Zip Code

mariefrancois124@comcast.net, and ducarmel1804@gmail.com

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

For further information concerning this matter, please call:

DUCARMEL Barosy

305

733- 3841

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Variety Store Plus Multi Service, L.L.C.

(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:

331 NE 150 Street, Miami Florida, 33161

Mailing Address:

331 NE 150 Street, Miami Florida, 33161

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:

DUCARMEL Barosy

Name

21 SW 63rd Avenue

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

Plantation

Florida

33317

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.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2020 APR 21 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

Marie F. Francols
331 NE 150 Street
Miami Florida 33161

AMBR

DUCARME Barosy
21 SW 63rd Street
Plantation Florida 33317

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 02/27/2020 (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.

MARIE F. FRANCOLS

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- S 30.00 Certified Copy (Optional)
- S 5.00 Certificate of Status (Optional)

FILED
2020 APR 21 AM 10:02
STATE OF FLORIDA
TALLAHASSEE, FL