

Jun

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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

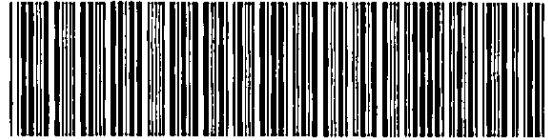
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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06/25/20--01019--002 \*\*125.00

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2020 JUN 25 PM 2:01

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COVER LETTER

TO: New Filing Section  
Division of Corporations

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2020 JUN 25 PM 2: 01

SUBJECT: The Dakota Assist, 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:

Tori Belanger

Name of Person

The Dakota Assist, LLC

Firm/Company

55440 Yellow Jacket Dr

Address

Callahan, FL 32011

City/State and Zip Code

tori@thedakotaassist.com

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

For further information concerning this matter, please call:

Tori Belanger

at ( 503 )

869-1349

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:

The Dakota Assist, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

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2020 JUN 25 PM 2:01

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ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

55440 Yellow Jacket Dr

Callahan, FL 32011

Mailing Address:

55440 Yellow Jacket Dr

Callahan, FL 32011

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:

Tori Belanger

Name

55440 Yellow Jacket Dr

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

Callahan

FL

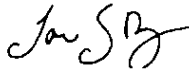
32011

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)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Tori Belanger

55440 Yellow Jacket Dr.  
Callahan, FL 32011

(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.

Tori Belanger

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)

# *the dakota assist*

YOUR VIRTUAL ASSISTANT

**To Whom It May Concern,**

I have tried multiple times since June 4, 2020 to file a new LLC on the Sunbiz.org website to no avail. Each time I have tried I am given an error telling me my email address is invalid. This is NOT the case.

I sent several emails hoping to get some assistance with the issue and never received a response. I have also tried calling and was hung up on by an automated system after sitting on hold for nearly half an hour.

AWFUL customer service!!!

This is my final attempt as it seems to be the last resort. Please find my LLC application and payment enclosed.

I would REALLY APPRECIATE some kind of acknowledgment that this application has been received and processed. I can be reached via email at [TORI@THEDAKOTAASSIST.COM](mailto:TORI@THEDAKOTAASSIST.COM) or by phone at 503-869-1349.

**Kind regards,**

**Tori Belanger**

**(503) 869-1349 | [TORI@THEDAKOTAASSIST.COM](mailto:TORI@THEDAKOTAASSIST.COM)**

55440 Yellow Jacket Dr, Callahan, FL, 32011, usa