

L20000231084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

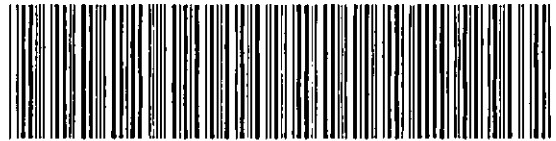
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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08/11/20--01001--009 \*\*150.00

08/11/20--01001--010 \*\*5.00

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2020 AUG 10 AM 9:13  
SECRETARY OF STATE  
TALLAHASSEE, FL

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**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** 08/10/2020

**XX** **CERTIFIED COPY**

☐ **PHOTOCOPY**

☐ **CUS**

**XX** **FILING**

LLC

1. **STELLAR BOUQUET L.L.C.**

(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Articles of Organization  
For  
Stellar Bouquet L.L.C.  
Florida Limited Liability Company**

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TALLAHASSEE, FL

**ARTICLE I - Name:**

The name of the Limited Liability Company is Stellar Bouquet L.L.C.

**ARTICLE II - Address:**

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

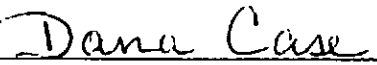
8010 SW 143rd Street  
Miami, FL 33158

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

Legalinc Corporate Services Inc.  
5237 Summerlin Commons  
Suite 400  
Fort Myers, FL 33907

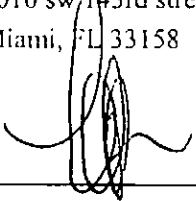
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.*

  
\_\_\_\_\_  
Dana Case, Manager

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Mark Dubner  
8010 sw 143rd street  
Miami, FL 33158

  
\_\_\_\_\_  
Carri Brown, Organizer