

# L20000257619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

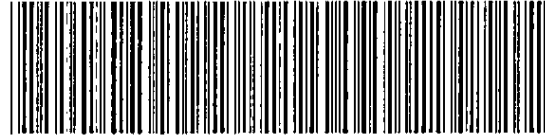
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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08/31/20--01001--011 \*\*250.00

2020 AUG 28 PM 3:44  
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SECRETARY OF STATE  
TALLAHASSEE, FL

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125.

**CORPORATE  
ACCESS,  
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**PICK UP:** 08/28/2020

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LLC

1. **GRACEFULLY OWNED, LLC**  
(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:**

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

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**GRACEFULLY OWNED, LLC**

THE UNDERSIGNED SUBSCRIBES TO THESE ARTICLES OF ORGANIZATION, A NATURAL PERSON COMPETENT, TO FORM A LIMITED LIABILITY COMPANY UNDER THE LAWS OF THE STATE OF FLORIDA.

**ARTICLE I**

THE NAME OF THE ORGANIZATION IS:

**GRACEFULLY OWNED, LLC**

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**ARTICLE II**

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS ORGANIZATION IS AS FOLLOW: TO CONDUCT BUSINESS IN THE SALES INDUSTRY AND ANY OTHER BUSINESS THAT THE MEMBERS MAY APPROVE FROM TIME TO TIME, HAVE ONE OR MORE OFFICES IN, AND BUY, HOLD, SELL, CONVEY, LEASE OR OTHERWISE DISPOSE OF PERSONAL AND REAL PROPERTY, INCLUDING FRANCHISES, TRADEMARKS, PATENTS, COPYRIGHTS, LICENSES, IN THE STATE OF FLORIDA AND OTHER STATES AND COUNTRIES.

PREPARED BY: TURNER AND MELENDEZ ACCOUNTANTS, INC  
7540 US HIGHWAY ONE SUITE 103  
LANTANA, FL 33462  
TEL:(561)582-3046 FAX:(561)582-0899

**ARTICLE III**

THE INITIAL POST OFFICE ADDRESS OF THIS ORGANIZATION IS:

**3018 ALCAZAR PL #301  
PALM BEACH GARDENS, FL 33410**

PALM BEACH COUNTY, FLORIDA. THE MEMBERS, FROM TIME TO TIME, MAY MOVE THE PRINCIPLE OFFICE TO ANY OTHER ADDRESS IN FLORIDA.

#### **ARTICLE IV**

CERTIFICATE DESIGNATING PLACE OF DOMICILE OR BUSINESS OF SERVICE OF PROCESS IN THE STATE OF FLORIDA AND DESIGNATION OF RESIDENT AGENT FOR SERVICE OF PROCESS.

IN PURSUANCE OF F.S. 48.091, THE FOLLOWING IS SUBMITTED IN COMPLIANCE WITH SAID ACT:

THAT DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH THE FOLLOWING PERSON DESIGNATED AS AGENT TO ACCEPT SERVICE OF PROCESS JAIME FERNANDEZ ADDRESS: 3018 ALCAZAR PL # 301, PALM BEACH GARDENS, FL 33410.

#### **ACKNOWLEDGMENT**

HAVING BEEN NAMED BY THE ABOVE CORPORATION TO ACCEPT SERVICE OF PROCESS DESIGNATED IN THE ABOVE CERTIFICATE, I HEREBY AGREE TO ACT IN SAID CAPACITY AND TO COMPLY WITH THE PROVISIONS OF KEEPING SAID OFFICE OPEN.

BY   
\_\_\_\_\_  
JAIME FERNANDEZ

**ARTICLE V**

THE NAME AND POST OFFICE ADDRESSE OF THE MANAGER OF THIS ORGANIZATION:

JAIME FERNANDEZ  
3018 ALCAZAR PL # 301  
PALM BEACH GARDENS, FL 33410

**MANAGER'S SIGNATURE**

  
JAIME FERNANDEZ

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