

L20000394492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

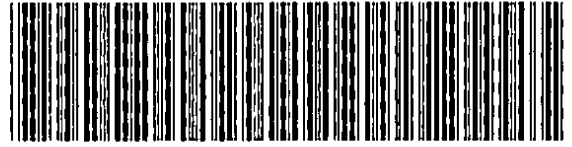
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/20/20--01035--014 **160.00

20 DEC -8 PM 2:31

D O'KEEFE
DEC 23 2020

W2-127



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2020

HELEN FRANCIS
P.O. BOX 813873
HOLLYWOOD, FL 33081

SUBJECT: A JOURNEYS NOTARY PLUS AGENCY LLC
Ref. Number: W20000127841

We have received your document for A JOURNEYS NOTARY PLUS AGENCY LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 820A00022203

*Mr. O'Keefe, Please see the enclosed document
w/ necessary change of physical Address.*

*Thank You.
Helen Francis*

20 DEC -3 PM 2:31

12/24/20

2020 DEC -3 PM 2:54

A Journey's Notary Plus Agency

Helen Francis
P.O. 813873
Hollywood, FL 33081
Business Telephone: (954) 837-9855
Personnel Cell: (954) 800-5873
Email Address: ajourneysnotary@yahoo.com

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

September 26, 2020

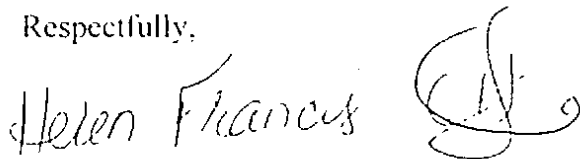
To whom it may concern:

This letter is a request to file and process the enclosed documents to start a Limited Liability Corporation, would like to do business as under the umbrella of "A Journey's Notary Plus Agency. The filing start requested is September 18th, 2020.

At this present time I, Helen Francis is the only employee and I president of the business. Enclosed is a money order in the amount of \$160.00: to cover all filing expenses to process the filing of this new application.

Also, all business transactions and correspondences should be sent to the post office box address.

Respectfully,

A handwritten signature in cursive script that reads "Helen Francis". To the right of the signature is a large, stylized circular flourish or loop.

Helen Francis

P.O. Box 813873

Hollywood, FL

33081

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: A Journey's Notary Plus Agency LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Helen Francis
Name of Person

Firm/Company

P.O. Box 813873
Address

Hollywood, FL 33081
City/State and Zip Code

ajourneynotary@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Helen Francis at 954, 837-9855
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:

A Journeys Notary Plus Agency, LLC
(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:

Helen Francis
3340 W. Oakland Park Blvd.
Lauderdale Lakes, FL 33311

Mailing Address:

P.O. Box 813873
Hollywood, FL 33081

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:

Marcelle Cheryl Elle Gram Productions Corp
Name
18510 N. Hub Hill Road #184
Florida street address (P.O. Box NOT acceptable)
Plantation FL 33322
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..

Marcelle Cheryl
Registered Agent's Signature (REQUIRED)

(CONTINUED)

NOTARIAL PUBLIC

20 DEC - 3 PM 2:41

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 & MGR

Name and Address:

Helen Francis
P.O. Box 813873
Hollywood, FL 33081

(Use attachment if necessary)

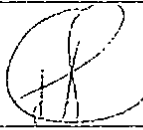
ARTICLE V: Effective date, if other than the date of filing: September 18, 20 (OPTIONAL)

(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:

Helen Francis 

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.

Helen Francis

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)