

L21000010054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

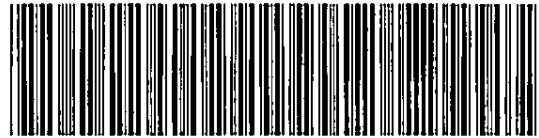
Special Instructions to Filing Officer:

Office Use Only

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JAN 13 2021

T. SCOTT



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10/02/20--01013--013 **150.00

FILED
2020 DEC 28 PM 1:24
ESTATE
FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2020

JOLEYN CARRIVEAU
9079 4TH STREET N
ST PETERSBURG, FL 33702

SUBJECT: HOME DENTAL 2 YOU, LLC
Ref. Number: W20000122385

We have received your document for HOME DENTAL 2 YOU, 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):

Document not complete.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 420A00023794

2020 11/30 PM 3:47

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: HD2U, 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:

Joleyn Cariveau
Name of Person

HD2U, LLC
Firm/Company

9079 4th St N
Address

St Petersburg, FL 33702
City/State and Zip Code

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

For further information concerning this matter, please call:

Joleyn Cariveau at (941) 720-5915
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:

HD24, 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: 9079 4th St N
St. Petersburg, FL
33702
Mailing Address: Same

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:

Joleyn CARRIVEAU
Name
4601 Chocellor St NE #247
Florida street address (P.O. Box NOT acceptable)
St Petersburg, FL 33703
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 DEC 28 PM 1:24
STATE OF FLORIDA

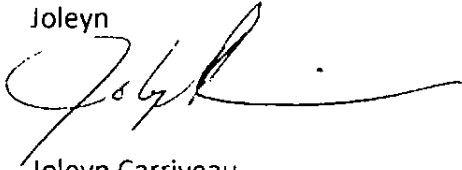
Dear Tyrone (SunBiz):

Please use the attached amended LLC application and \$160.00 fee for establishing my HD2U LLC.

After consulting with my accountant, I wanted to complete the Sunbiz application for my HD2U, LLC before the close of the 2020 tax year.

I have attempted to call and leave messages with no success.

Thank you,
Joleyn

A handwritten signature in black ink, appearing to read "Joleyn Carriveau", with a long horizontal flourish extending to the right.

Joleyn Carriveau

RE: HD2U, LLC