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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2020

MARY C. MARSHALL 1145 WYNNEWOOD DR. WEST PALM BEACH, FL 33417

SUBJECT: SEA SPRAY OF SOUTH FLORIDA, LLC

Ref. Number: W20000107646

We have received your document for SEA SPRAY OF SOUTH FLORIDA, 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):

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Derrick Thompson Regulatory Specialist II

Letter Number: 820A00017930

2020 CCT 19 AH II: 45



August 3, 2020

MARY C. MARSHALL 1145 WYNNEWOOD DR. WEST PALM BEACH, FL 33417

SUBJECT: SEASPRAY, LLC Ref. Number: W20000083924

We have received your document for SEASPRAY, 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):

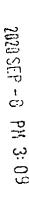
The document number of the name conflict is L20000148824.

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.

Derrick Thompson Regulatory Specialist II

Letter Number: 620A00014523



COVER LETTER

TO: New Filing Section

Division of Corporations

SUBJECT: SEA SPRAY OF SOUTH FLORIDA, LLC.

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name:

MARY C. MARSHALL

Address:

1145 WYNNEWOOD DR.

WEST PALM BEACH, FL 33417

E-mail:

SEASPRAYSFL@GMAIL.COM

For further information concerning this matter, please call:

MARY C. MARSHALL at (561) 935-7024

Enclosed is a check for the following amount:

□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee &

Certificate of Status

of Status Certified Copy

(additional copy is enclosed)

Previously Submitted

→ \S\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:

SEA SPRAY OF SOUTH FLORIDA, LLC.

ARTICLE II - Address:

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

Principal Office Address: Mailing Address:

1145 WYNNEWOOD DR. <u>1145 WYNNEW</u>OOD DR.

WEST PALM BEACH, FL 33417 WEST PALM BEACH, FL 33417

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:

MARY C. MARSHALL

1145 WYNNEWOOD DR.

WEST PALM BEACH, FL 33417

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)

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	MARY C. MARSHALL 1145 WYNNEWOOD DR. WEST PALM BEACH, FL 33417
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: <u>AUGUST 1, 2020</u>. (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.

A	RTICE	E	VI:	Other	provisions.	if any.	
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REQUIRED SIGNATURE;	e de la companya de l	AH	[1]
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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.

MARY C. MARSHALL

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)