

LZ1000106624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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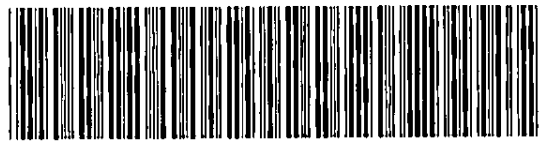
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

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2021 Mär 15 PM 5:37

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Shine Like Stars Childcare development Center LLC.
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Camesha Young
Name of Person

Firm/Company

3313 Armstrong Ct.
Address

Fort Myer FL 33916
City/State and Zip Code

Camesha1y@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Camesha Young at (239) 878 8319
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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:

Shine Like Stars Childcare development 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:

3313 Armstrong Ct
Fort Myers FL 33916

Mailing Address:

3313 Armstrong Ct
Fort Myers FL 33916

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:

Corisha Young
Name

3313 Armstrong Ct
Florida street address (P.O. Box **NOT** acceptable)
Fort Myers FL 33916
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.

Cy
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

Mickendy Theriault

AMBR

Mickendy Theriault
2417 Herb Ave S.
Lehigh, Pa 33972

(Use attachment if necessary)

ARTICLE V: "Effective date," other than the date of filing, _____ (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 an effective date is listed, the document does not meet the appropriate statutory filing requirements unless the date was actually filed on or before the date of filing, as recorded in the Department of State's records.

ARTICLE VI: Other provisions, if any, _____

REQUIRED SIGNATURE:

E. Young

Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0263 (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.

Carlesha Young

Typed or printed name of signer

Filing Fees:

U.S. 605.0263 (1) (b) - Fee for Communication and Designation of Registered Agent.