

L21000 129785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

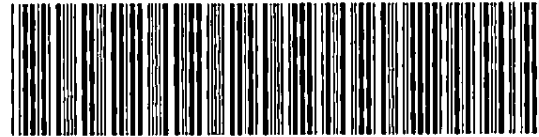
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 MAR 30 AM 11:59

2021 MAR 30 PM 12:22



SRIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: S+S Storefront Services 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:

Waverly Annette Bush
Name of Person

S+S Storefront Services LLC
Firm/Company

822 Hagg Street
Address

Tallahassee, Florida 32305
City/State and Zip Code

Waverly7Cool@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Waverly A. Bush at (850) 212-2754
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" 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:

S + S Storefront Services 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:

822 Hagg Street
Tallahassee, Florida
32305

Mailing Address:

822 Hagg Street
Tallahassee, Florida
32305

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:

Waverly Annette Bush
Name

822 Hagg Street
Florida street address (P.O. Box NOT acceptable)

Tallahassee, Florida 32305
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.

Waverly Annette Bush
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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MAR 30 AM 11:59

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

Waverly Bush, AMBR

822 Flagg Street
Tallahassee, FL 32305

Searcy Bush, MGR

1455 Live Oak Dr.
Tallahassee, FL 32301

(Use attachment if necessary)

ARTICLE V: Effective date, if 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 which does not meet the appropriate statutory filing requirements, this date will not be listed as part of the document's effective date in the Department of State's records.

ARTICLE VI: Other provisions, if any, _____

REQUIRED SIGNATURE:

Waverly Annette Bush

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (5), 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.

Waverly Annette Bush

(Type or printed name of signee)

Filing Fees:

\$25.00 Filing Fee for Articles of Organization and Designation of Registered Agent.

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