

L21000219356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

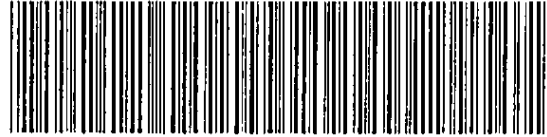
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



900349587299

03/25/21--01024--029 **160.00

SECRETARY OF STATE
OF MASSACHUSETTS

2021 MAY 17 PM 2:45

FILED

MAY 17 2021

M. SOLOMON

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Shining star Property Investment 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:

Herlie M Rameau

Name of Person

Shining star Property Investment LLC

Firm/Company

4024 Meadowlark dr

Address

Kissimmee, FL 34746

City/State and Zip Code

herlieff@outlook.com

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

For further information concerning this matter, please call:

Herlie Rameau

407

2850767

at ()

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 MAY 17 PM 2:45

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Shining Star Property Investment 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:

4024 Meadowlark dr Kissimmee Fl 34746

Mailing Address:

4024 Meadowlark dr Kissimmee Fl 34746

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:

Herlie M Rameau

Name

4024 meadowlark dr

Florida street address (P.O. Box **NOT** acceptable)

Kissimmee

Fl

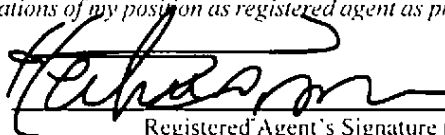
34746

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.



Registered Agent's Signature (REQUIRED)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 MAY 17 PM 2:45

FILED

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Hertie M Rameau

4024 Meadowlark dr Kissimmee FL 34746

AMBR

Lionel Rameau

4024 Meadowlark dr Kissimmee FL 34746

AMBR

Christopher L. Rameau

4024 Meadowlark dr Kissimmee FL 34746

AMBR

Sebastian N Rameau

4024 Meadowlark dr Kissimmee FL 34746

(Use attachment if necessary)

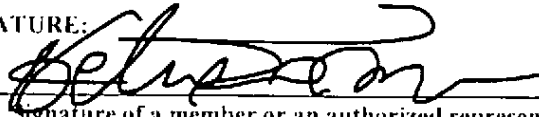
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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 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:



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.

Hertie M Rameau

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)

2021 MAY 17 PM 2:45

FILED

CLERK OF STATE
TREASURY
FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2021

HERLIE M. RAMEAU
SHINING STAR PROPOERTY INVESTMENT LLC
4024 MEADOW LARK DR.
KISSIMMEE, FL 34746

SUBJECT: SHINING STAR PROPERTY INVESTMENT LLC
Ref. Number: W21000039215

RECEIVED
2021 MAY 17 PM 2:09
SECRETARY OF STATE
DIVISION OF CORPORATIONS

We have received your document for SHINING STAR PROPERTY INVESTMENT LLC . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a Foreign Limited Liability Company, but your entity is a Florida Limited Liability Company. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon
Senior Section Administrator

Letter Number: 121A00006184