

L21000441122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

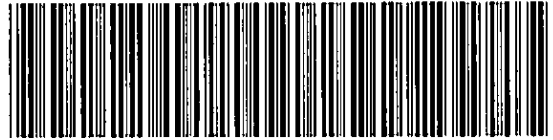
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

*ATZ *No Money
attached*

Office Use Only



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10/07/21--01002--001 **125.00

filed 9/1/21

2021 SEP -1 PM 3:37

W21-113776



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2021

LAUREN DUNN
125 21ST AVE SE
ST. PETERSBURG, FL 33705

SUBJECT: SALT'D CANDLE CO. LLC
Ref. Number: W21000113776

We have received your document for SALT'D CANDLE CO. LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

No payment was received with your application. Please return all documents along with a payment for \$125.00.

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.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 921A00019702

2021 SEP -1 11:10:55

2021 SEP -1 PM 3:51

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Salt'd Candle Co.
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:

Lauren Dunn

Name of Person

Salt'd Candle Co.

Firm/Company

125 21st Ave SE

Address

St. Petersburg, FL 33705

City/State and Zip Code

saltcandleco@gmail.com

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

For further information concerning this matter, please call:

Lauren Dunn

207

653-4774

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

7/1/00 \$

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Salt'd Candle Co. 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:

Salt'd Candle Co. LLC

125 21st Ave SE

St. Petersburg, FL 33705

Mailing Address:

Salt'd Candle Co. LLC

125 21st Ave SE

St. Petersburg, FL 33705

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:

Lauren Dunn

Name

125 21st Ave SE

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

St Petersburg

FL

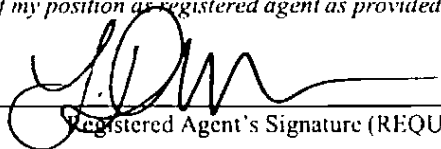
33705

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)

(CONTINUED)

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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:

Manager

Lauren Dunn

125 21st Ave SE

St. Petersburg, FL 33705

(Use attachment if necessary)

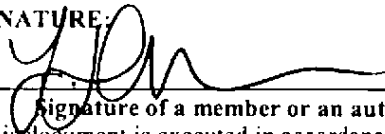
ARTICLE V: Effective date, if other than the date of filing: 09/01/2021 (OPTIONAL)

(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.

Lauren Dunn

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)

FILED

2021 SEP -1 PM 8:31