# L21000474064

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	e)
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Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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DIOKEEET

W21-124850



September 15, 2021

YVETTE DENISE COLEY 6911 WEST SUNRISE BLVD, STE 308 PLANTATION, FL 33313

SUBJECT: YVETTE'S FUSION GRILLE, LLC

Ref. Number: W21000124850

We have received your document for YVETTE'S FUSION GRILLE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

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: 421A00022275

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# **COVER LETTER**

TO:	New Filing Section Division of Corporat	ons			
SURIE		ON GRILLE, LLC			
SUBJECT: Name of Limited Liability Company					
The end	closed Articles of Organ	ization and fee(s) ar	e submitted f	or filing.	
Please	return all correspondenc	e concerning this m	atter to the fo	llowing:	
	YVETTE DENISE	COLEY			
		<del></del>	Name of I	Person	
			Firm/Con	npany	
	6911 WEST SUNF	ISE BLVD, STE 3	08		
	-		Addre	SS	
	PLANTATION, FI	. 33313			
	YVETTECOLEY@		City/State and	Zip Code	
			for future ar	nual report notificati	on)
For furth	ner information concerni	ng this matter, pleas	e call:		
	YVETTE D COLE		54	6042987	
	Name of Po		rea Code	Daytime Telephone	e Number
Enclose	ed is a check for the follo	owing amount:			
□\$12:		130.00 Filing Fee & tificate of Status	Certifie	.00 Filing Fee & d Copy l copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Add	_ <del></del>		Street Address New Filing Section Di	vicion
	New Filing Se Division of C	Corporations		The Centre of Tallaha	assee
	P.O. Box 631	7	7	415 N. Monroe Stree	et. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

# YVETTE'S FUSION GRILLE, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

# **ARTICLE 11 - Address:**

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

# **Principal Office Address:**

Mailing Address:

6911 WEST SUNRISE BLVD	6911 WEST SUNRISE BLVD		
STE 308	STE 308		
PLANTATION, FL 33313	PLANTATION, FL 33313		

# 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:

LAMAE BILLING SERVICES EN 12 - Prise I INC

8480 MAN O WAR RD

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

PALM BEACH GARDEL FL 33418

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 properties agent as provided for in Chapter 605, F.S..

egistered Agent's Signature (REQUIRED)

(CONTINUED)

# ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR / MGR	YVETTE D COLEY 6911 WEST SUNRISE BLVD. PLANTATION. FL 33313
	D- 1
(Use attachment if necessary)	الله الله الله الله الله الله الله الله
if an effective date is listed, the date mu be date of filing.)	the date of filing:
he document's effective date on the Department	
RTICLE 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.847.155, F.S.,

YVETTE D.COLEY

Typed of 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)