Division of Corporations Electronic Filing Cover Sheet

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(((H22000084024 3)))



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Account Number : 104662003400

: (516)935-3940

Fax Number : (516)935-3088

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

RELLY094@ICLOUD.COM Email Address

FLORIDA LIMITED LIABILITY CO.

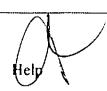
CREATIVE MINDS BY L AND A LLC

L&A DESIGNS LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130,00

Electronic Filing Menu

Corporate Filing Menu



1/001



3/7/2022 2:30:43 PM PAGE

March 7, 2022

FLORIDA DEPARTMENT OF STATE Division of Corporations

HUBCO

SUBJECT: L&A DESIGNS LLC

REF: W22000029548

We received your electronically transmitted document. However, the $\frac{1}{2}$ document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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Dil Sultana Regulatory Specialist II FAX Aud. #: H22000084024 Letter Number: 822A00005443

P.O BOX 6327 - Tallahassee, Florida 32314

H22000084024

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	CREATIVE MINI	DS BY L AND	ALLC			
(Mı	ist end with the words "I	Limited Liability	Сотралу, "L.L	C.," or "LLC.")		
ARTICLE II - Address:						
The mailing address and	street address of the prin	cipal office of the	Limited Liabi	lity Company is:		
Principal Office Addres	<u>s:</u>	Mailing Addres	<u>ss:</u>			
18641 DRAYTON	ST	1864	1 DRAYTO	N ST		
SPRING HILL, FL			NG HILL, F			
ARTICLE III - Register (The Limited Liability Coanother business entity v	vith an active Florida reg	gistration.)		ignature: nust designate an i	12 HAR -8	
The name and the Florida	street address of the reg	gistered agent are:	:		지역 축	Ţ
<u> </u>	RIEL SMITH	<u> </u>		<u></u>	- S	į
		Name			SIAIT SIAIT	
1	8641 DRAYTON	ST			- ω	
_	Florida street address (P	O. Box NOT acc	ceptable)			
•	SPRING HILL	FL	34610			
_	City		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)

ARIEL SMITH

(CONTINUED)

Page 1 of 2

H22000084024

Title:	Name and Address:			
"AMBR" = Authorized Member	vame and Address:			
"MGR" = Manager AMBR	ARIEL SMITH			
	18641 DRAYTON ST SPRING HILL, FL 34610			
AMBR	LISA BRUDNICKI			
	18641 DRAYTON ST			
	SPRING HILL, FL 34610			
				
			_	
(Use attachment if necessary)			2022 MAR	
•		높 ^E	TK A	
ARTICLE V: Effective date, if other than the date of filin	g: (OPTION,	AL)	20	
(If an effective date is listed, the date must be specific a the date of filing.)	nd cannot be more than live business days prio	T 1000F-90	osys a	iten
I DOWN COLUMN CO			A	17
ARTICLE VI: Other provisions, if any.		10.0 11.5	ë	
		En	0	
		2:-	\times	
REQUIRED SIGNATURE:				
Hall Smit	.			
Signature of a member of	or an authorized representative of a member. 03 (1) (b), Florida Statutes, the execution of this of	locument		
constitutes an affirmation under the	e penalties of perjury that the facts stated herein a	ire true.		
onstitutes a third degree felony as	on submitted in a document to the Department of provided for in s.817,155, F.S.)	State		
5	ARIEL SMITH			
Турс	d or printed name of signee			

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