

L23000507069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

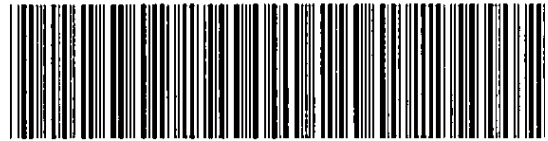
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400418526054

11/05/23--01034--002
005-4500452-4825
DEPOSIT ONLY 125
11/05/23--01034--

2023 Nov -6 AM 2:01

New Filing Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

10/31/2023

To Whom It May Concern:

Please receive this letter of acknowledgment to register Articles of Organization for Living with Intention and Purpose, LLC. Enclosed is a check made payable to the Florida Department of State in the amount of \$125.00 to cover filing fees. The effective date listed under Article V is January 1, 2024.

I, Nicola Williams, who resides at 622 Pearl Road, Winter Springs, FL 32708, am the registered agent and will be the Authorized Member of the LLC. I can be reached at (321) 439-6117. Please let me know if there are any questions about the enclosed application.

Thank you,



Nicola Williams

Registered Agent

2023 NOV -6 PM 2:01
[REDACTED]

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Living with Intention and Purpose, 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:

Nicola Marie Williams

Name of Person

Living with Intention and Purpose

Firm/Company

622 Pearl Road

Address

Winter Spring, FL 32708

City/State and Zip Code

nicola_williams@livingintentionpurpose.com

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

For further information concerning this matter, please call:

Nicola Williams

321

439-6117

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

2023 NOV - 6 11:21

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Living with Intention and Purpose, 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:

622 Pearl Rd
Winter Springs, FL 32708

Mailing Address:

622 Pearl Rd
Winter Springs, FL 32708

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:

Nicola Williams

Name

622 Pearl Rd

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

Winter Springs

Florida

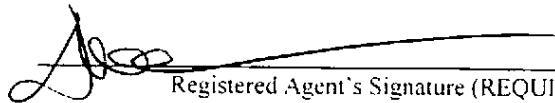
32708

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)

2023 NOV -6 AM 2:01

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:

AMBR

Nicola Williams

622 Pearl Rd

Winter Springs, FL 32708

(Use attachment if necessary)

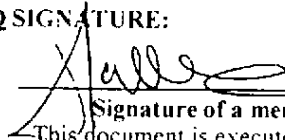
ARTICLE V: Effective date, if other than the date of filing: 01/01/2024 (OPTIONAL)

(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.

Nicola Williams

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

2023 NOV -6 AM 2:01