

W12000003349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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06/12/12--01011--017 **125.00

06/12/12--01011--018 **5.00

FILED

2012 JUN 13 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W12-32049

J. BRYAN

JUN 15 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Miss Lucille's, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Samuel T Moore

Name of Person

Miss Lucille's, LLC

Firm/Company

45 Town Center Loop, Unit C-7

Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

moore.samuel.t.@gmail.com

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

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2012 JUN 13 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Carol Missildine

Name of Person

at (850) 622-0888

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2012

SAMUEL T MOORE
MISS LUCILLE'S LLC
45 TOWN CENTER LOOP, UNIT C-7
SANTA ROSA BEACH, FL 32459

SUBJECT: MISS LUCILLE'S, LLC
Ref. Number: W12000032049

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MISS LUCILLE'S, 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):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your application so that we may complete the filing process.,

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) 245-6051.

Joey Bryan
Regulatory Specialist II

Letter Number: 712A00016563

Miss Lucille's, LLC
45 Town Center Loop, Unit C-7
Santa Rosa Beach, FL 32459
850-267-2522

FILED
2012 JUN 13 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 14, 2012

Mr. Joey Bryan
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Miss Lucille's, LLC #W12000032049

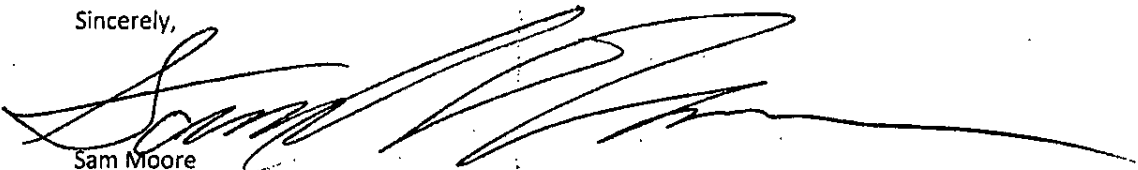
Dear Mr. Bryan:

The above named business was purchased from the previous owner, Miss Lucille's, Inc., on May 1, 2012 and has continued to do business at the same business location with the same employees.

Our previous filing with the Florida Department of State was rejected due to the fact that the business name was already in use. However as the new owners, we are using the same business name.

Thank you for your consideration.

Sincerely,



Sam Moore
Managing Member
Miss Lucille's, LLC

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Miss Lucille's, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Davidson County TN 3. 45-5062882
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 04/19/2012 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. 05/01/2012
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 45 Town Center Loop, Unit C-7, Santa Rosa Beach, FL 32459
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☐

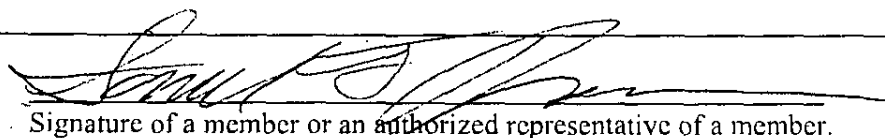
9. The name and usual business addresses of the managing members or managers are as follows:

Samuel T Moore, Operating Manager

Anne A Moore, Managing Member

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Food and beverage sales


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Samuel T Moore

Typed or printed name of signee

FILED
2012 JUN 13 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Miss Lucille's LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

McDaniel and Associates, PC

(Name)

2441 W US Hwy 98, Suite 108

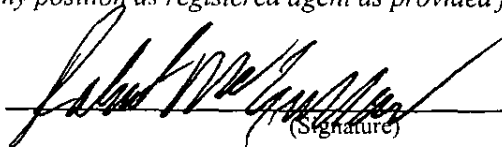
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Santa Rosa Beach

FL

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 608, Florida Statutes.


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

2012 JUN 13 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



STATE OF TENNESSEE
Tre Hargett, Secretary of State
Division of Business Services
William R. Snodgrass Tower
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

RICHARD MOORE
456 DEER RIDGE LN
NASHVILLE, TN 37221-6607

Request Type: Certificate of Existence/Authorization
Request #: 0066115

Issuance Date: 05/11/2012
Copies Requested:

May 11, 2012
2012 JUN 13 PM 3:30
FILED
TALLAHASSEE, FLORIDA
\$20.00
\$20.00

Document Receipt

Receipt #: 755426

Filing Fee: \$20.00

Payment-Cash - RICHARD MOORE, NASHVILLE, TN

Regarding: Miss Lucille's LLC

Filing Type: Limited Liability Company - Domestic

Formation/Qualification Date: 04/19/2012

Status: Active

Duration Term: Perpetual

Control #: 684471

Date Formed: 04/19/2012

Formation Locale: DAVIDSON COUNTY

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Miss Lucille's LLC

* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;

* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

* has appointed a registered agent and registered office in this State;

* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

Processed By: Nichole Hambrick

Verification #: 000938322