

W1200003622

(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:

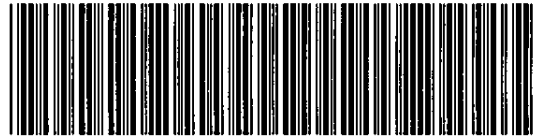
W12-28103

A. LUNT

JUN 28 2011

EXAMINER

Office Use Only



200235180102

05/18/12--01027--007 **260.00

FILED
2012 JUN 27 AM 5:08
CLERK OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 21, 2012

JOSHUA O. DORCEY, ESQ
10181 SIX MILE CYPRESS PKWY SUITE C
FORT MYERS, FL 33966

SUBJECT: RUTY LADAS INSURANCE & BUSINESS SERVICES, LLC
Ref. Number: W12000028103

We have received your document for RUTY LADAS INSURANCE & BUSINESS SERVICES, LLC and your check(s) totaling \$260.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable : "Limited Company," "L.C.," and "LC".

You must submit a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 212A00014861



THE DORCEY LAW FIRM, PLC

*Estate Planning - Business Planning - Asset Protection,
Probate - Estate Litigation - Business Litigation*

239-418-0169

DorceyLaw.com

Joshua O. Dorcey, Esq. *
Managing Member

Josh@DorceyLaw.com

May 16, 2012

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

FILED
2012 JUN 27 AM 5:58
TALLAHASSEE, FL 32314

Re: RUTH LADAS INSURANCE & BUSINESS SERVICES, LLC & HAPPY
COUPLE ENTERPRISES, LLC

To Whom It May Concern:

Please find attached the Cover Letter, Application By Foreign Limited Liability Company, Certificate of Designation of Registered Agent/Registered Office, Certificate of Good Standing, and a check for the above listed Limited Liability Company filing fees and Certificate of Status.

If you have any questions or concerns, please feel free to contact the office at the information provided at the bottom of this letter.

Sincerely,

Kristine Papp,
Paralegal to Joshua O. Dorcey, ESQ.

Enclosures: ck#: 2196

** also admitted in Alabama*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RUTH LADAS INSURANCE & BUSINESS SERVICES, 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:

JOSHUA O. DORCEY

Name of Person

THE DORCEY LAW FIRM, PLC

Firm/Company

10181 SIX MILE CYPRESS PKWY. STE. C

Address

FORT MYERS, FLORIDA 33966

City/State and Zip Code

JOSH@DORCEYLAW.COM

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

For further information concerning this matter, please call:

JOSHUA O. DORCEY

Name of Person

at (239)

418-0169

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

FILED
2012 JUN 27 AM 5:09
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of RUTH LADAS INSURANCE & BUSINESS SERVICES, LLC,
(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of
WYOMING
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:

RUTH LADAS INSURANCE & BUSINESS SERVICES OF SW FLORIDA, LLC

(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability
Company, L.L.C., or LLC.)

Date: 6-2-12

Signature(s) of Manager(s) and/or Managing Member(s):

Ruth Ladas

2012 JUN 27 AM 5:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**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 TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. **RUTH LADAS INSURANCE & BUSINESS SERVICES, LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Ruth Ladas Insurance & Business Services of SW Florida, 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. **WYOMING**

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(FEI number, if applicable)

4.

(Date of Organization)

5.

PERPETUAL

(Duration: Year limited liability company will cease to exist or "perpetual")

6.

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

7. **3454 HANCOCK BRIDGE PKWY. B5**

NORTH FORT MYERS, FLORIDA 33903

(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:

RUTH C. LADAS

3454 HANCOCK BRIDGE PKWY. B5

NORTH FORT MYERS, FL 33903

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:

ANY AND ALL LAWFUL PURPOSE

Ruth Ladas

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.)

RUTH C. LADAS

Typed or printed name of signee

**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:

RUTH LADAS INSURANCE & BUSINESS SERVICES, LLC

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

RUTH LADAS INSURANCE & BUSINESS SERVICES OF SW FLORIDA, LLC

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

THE DORCEY LAW FIRM, PLC

(Name)

10181 SIX MILE CYPRESS PKWY. STE. C

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

FORT MYERS

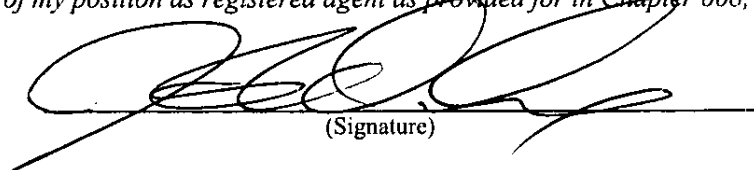
FL 33966

City/State/Zip

2012 JUN 27 AM 5:46
CLERK OF COURT
TALLAHASSEE, FLORIDA

FILED

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)

State of Wyoming

Office of the Secretary of State



United States of America, }
State of Wyoming } ss.

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Ruth Ladas Insurance & Business Services LLC
is a
Limited Liability Company

did on **April 3, 2012**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2012-000619950**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 11th day of April, 2012 at 11:09 AM.



Max Maxfield
Secretary of State

By *Reenie Gonzalez*