

ME000006831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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W15-53774

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 28 2015

S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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15 AUG 28 PM 2:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 10, 2015

FRANK PRICE  
PO BOX 6222  
NAVARRE, FL 32566

SUBJECT: PRICE LLC  
Ref. Number: W15000053774

Frank Price, LLC

We have received your document for PRICE LLC and your check(s) totaling \$125.00. 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 since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 515A00016834

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: PRICE, 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:

FRANK PRICE

\_\_\_\_\_  
Name of Person

PRICE, LLC

\_\_\_\_\_  
Firm/Company

PO BOX 6222

\_\_\_\_\_  
Address

NAVARRE, FL 32566

\_\_\_\_\_  
City/State and Zip Code

FRANKALLENPRICE@GMAIL.COM

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

For further information concerning this matter, please call:

JULIE E. OZSOY, CPA

337

462-0522

\_\_\_\_\_  
Name of Contact Person

at (\_\_\_\_\_) \_\_\_\_\_  
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

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TALLAHASSEE, FLORIDA

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. PRICE, LLC

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

Frank Price, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited  
Liability Company," "L.L.C." or "LLC.")

2. LOUISIANA

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

3. 27-2457124

(FEI number, if applicable)

4. JULY 2, 2015

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4966 HICKORY SHORES BLVD

GULF BREEZE, FL 32563

(Street Address of Principal Office)

6. P.O. BOX 6222

NAVARRE, FL 32566

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: FRANK PRICE

Office Address: 4966 HICKORY SHORES BLVD

GULF BREEZE, Florida 32563

(City)

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in  
this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept  
the obligations of my position as registered agent.

*Frank Allen Price*

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

FRANK PRICE, MANAGING MEMBER, PO BOX 6222, NAVARRE, FL 32566

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath  
of the translator must be submitted)

*Frank Allen Price*

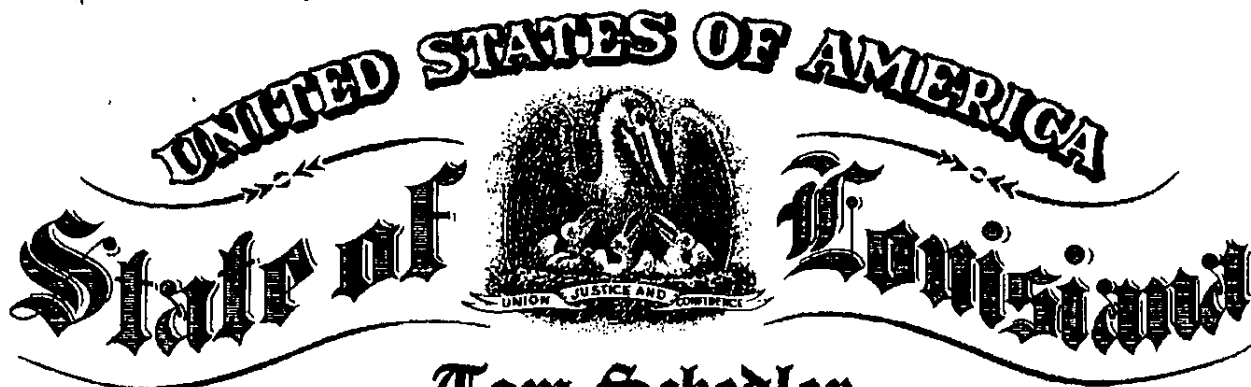
Signature of an authorized person

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.

*Frank Allen Price*

Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**Tom Schedler**  
SECRETARY OF STATE

*As Secretary of State of the State of Louisiana I do hereby Certify that*

In response to your request we are pleased to provide the information on the subject  
Limited Liability Company which filed articles of organization in this office on April 28,  
2010.

**Name:** PRICE LLC

**Type:** Limited Liability Company

**City:** LEESVILLE

**Status:** ACTIVE

**Business:** PRICE LLC

**Charter Number:** 40192973 K

**Registration Date:** 4/28/2010

**Domicile Address**  
148 BURNS COOLEY RD  
LEESVILLE, LA 71446

**Mailing Address**  
FRANK ALLEN PRICE  
P.O. BOX 6222  
NAVARRE, LA 32566

**Status:** ACTIVE

**Annual Report Status:** In Good Standing

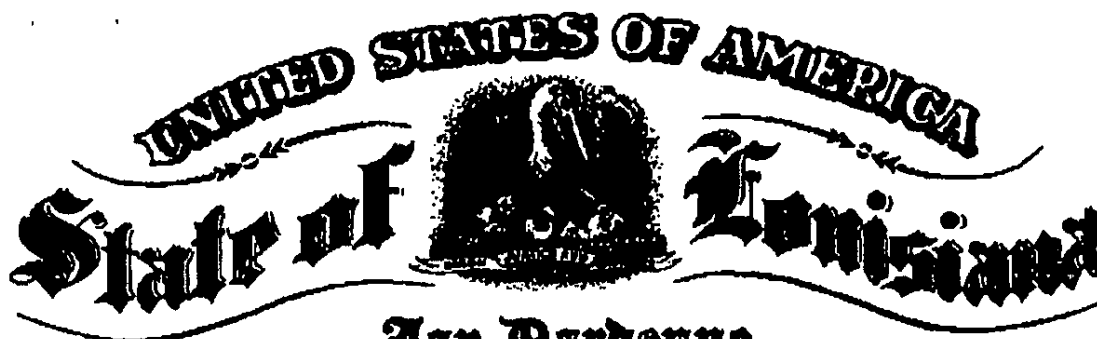
**Last Report Filed:** 8/3/2015

**Type:** Limited Liability Company

**Registered Agent(s)**

**Agent:** FRANK PRICE  
**Address:** 731 ALEXANDRIA HWY  
**City, State, Zip:** LEESVILLE, LA 71446  
**Appointment Date:** 4/28/2010

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SECRETARY OF STATE  
TOM SCHEDLER



**Jay Bardenne**  
**SECRETARY OF STATE**

*The Secretary of State of the State of Louisiana I do hereby Certify that*

a copy of the Articles of Organization and Initial Report of

**PRICE LLC**

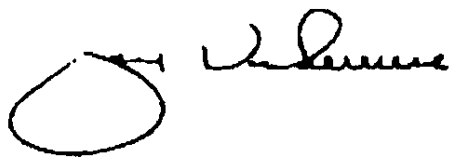
Domiciled at LEESVILLE, LOUISIANA,

Was filed and recorded in this Office on April 28, 2010,

And all fees having been paid as required by law, the limited liability company is authorized to  
transact business in this State, subject to the restrictions imposed by law, including the provisions of  
R.S. Title 12, Chapter 22.

In testimony whereof, I have hereunto set my  
hand and caused the Seal of my Office to be  
affixed at the City of Baton Rouge on,

April 28, 2010

  
*Secretary of State*

WEB 40182873K



Certificate ID: 10063905#52N83

To validate this certificate, visit the following web site,  
go to **Commercial Division, Certificate Validation**,  
then follow the instructions displayed.  
[www.sos.louisiana.gov](http://www.sos.louisiana.gov)

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FBI BATON ROUGE, LOUISIANA

**Officer(s)**

**Officer:**

**Title:**

**Address:**

**City, State, Zip:**

FRANK PRICE

Manager

731 ALEXANDRIA HWY

LEESVILLE, LA 71446

**Additional Officers: No**

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FBI - BATON ROUGE

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

August 3, 2015



*Secretary of State*

Web 40192973K



Certificate ID: 10623450#ARK73

To validate this certificate, visit the following web site, go to **Business Services**, **Search for Louisiana Business Filings**, **Validate a Certificate**, then follow the instructions displayed.  
[www.sos.la.gov](http://www.sos.la.gov)