

P13000089370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

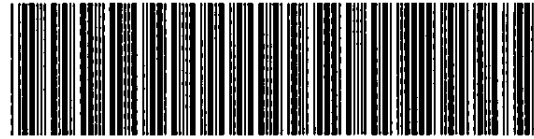
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 OCT 30 PM 2:44



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 9, 2013

JAMES COCHRAN  
6340 SW 35 ST  
MIRAMAR, FL 33023

SUBJECT: BOOBIE BANDZ ~~LLC~~ Incorporated  
Ref. Number: W13000056218

We have received your document for BOOBIE BANDZ LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted the document and fees to form a Florida corporation; however, your name implies you wish to form a limited liability company. The name of a corporation cannot contain a limited liability company suffix. Limited Liability Company, Ltd. Liability Co., and L.L.C. are all limited liability company suffixes. The name of a corporation must contain Corporation, Corp., Incorporated, Inc., Company or Co.

Please correct the suffix or, if you wish to form a limited liability company, submit "Articles of Organization" along with the additional fee(s). Any fees previously submitted with your corporate filing will be applied to your limited liability company filing.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6052.

Pamela Smith

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: BOOBIE BANDZ LLC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: BOOBIE BANDZ LLC  
Name (Printed or typed)

6340 S.W. 35th  
Address

MILANOA FL 33023  
City, State & Zip

786-531-5181 786)314-0324  
Daytime Telephone number

BOOBIEBANDZ49@gnailt.com  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

INCORPORATED

ARTICLE I NAME

The name of the corporation shall be: BOBBIE BAUD 2 LLC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6340 S.W. 35th  
Miramar FL  
33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to do any and all business in the  
state of Florida

ARTICLE IV SHARES

The number of shares of stock is: 2

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Cochran Name and Title:

Address: 6340 S.W. 35th Address:

MIRAMAR FL

33023

Name and Title: RYAN STOKES Name and Title:

Address: 6340 S.W. 35th Address:

MIRAMAR FL

33023

Name and Title: Dwight Stokes Name and Title:

Address: 6340 SW 35th Address:

MIRAMAR FL

33023

(cont.)

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: \_\_\_\_\_

Tamara Cochran

Address: \_\_\_\_\_

6340 S.W. 35th

Miramar FL 33023

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: \_\_\_\_\_

Tamara Cochran

Address: \_\_\_\_\_

6340 S.W. 35th

Miramar FL 33023

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

\_\_\_\_\_  
Required Signature/Registered Agent

9-16-13  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

\_\_\_\_\_  
Required Signature/Incorporator

9-16-13  
Date