# L09000095211

(Requestor's Name)			-
(Address)			
(Address)			
(City/State/Zip/Phone #)			
, , , , ,			•
PICK-UP WAIT		MAIL	•
<del></del>			
(Duzinana Fakita Mara)		,	
(Business Entity Name)	:	•	į,
	:	ŧ	;
(Document Number)	;	,	;
			•
Certified Copies Certificates of S	tatus	5·	
	•	•	
Special Instructions to Filing Officer:		. ,	•
Opecial instructions to traing officer.			
			ļ
			-
<u> </u>			

Office Use Only



900161114539

10/01/09--01010--018 \*\*125.00



M. THOMAS

OCT 2 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registratio Division of	n Section Corporations		
SUBJECT: "Top	Notch" Paver Sealing		LC
	(Name of Limit	ed Liability Company)	
	es of Organization and fee(s) are	_	
Please return all cor	respondence concerning this matt	er to the following:	
Paul Me	ssina		
-		(Name of Person)	
"Top Not	ch" Paver Sealing & F	Pressure Washing, LL	_C
		(Firm/Company)	
3681 St	okes Dr.		7.00°
		(Address)	CP OC
Sarasot	a, FL 34232		ETAR ETAR
	·	y/State and Zip Code)	EEO E
		•	SERVER FIRE FIRE FIRE FIRE FIRE FIRE FIRE FI
For further informati	on concerning this matter, please	call:	のの部ま
Paul Messina		at (941 ) <del>371-721</del>	7
(Na	nme of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check	for the following amount:		
	ee \$130.00 Filing Fee &	☐ \$155.00 Filing Fee &	\$160.00 Filing Fee,
(4.) \$123.00 Timig 1	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 29, 2009

PAUL MESSINA 3681 STOKES DR. SARASOTA, FL 34232

SUBJECT: TOP NOTCH PAVER SEALING & PRESSURE WASHING, LLC

Ref. Number: W09000043448

We have received your document for TOP NOTCH PAVER SEALING & PRESSURE WASHING, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$125.00.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 909A00031644

FILED
2009 OCT -1 AM II: 46
SECRETARY OF STATE
SECRETARY OF STATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	ed Liability Company is:		
The name of the Emilia	ou Eluonity Company is:		
	aling & Pressure Washing, and the Liability Company, "Limited	LLC Company" or their abbreviation "LLC," or	r "L.C.,")
ARTICLE II - Addre The mailing address an		ncipal office of the Limited Liab	ility Company is:
Principal Office Adda	ress:	Mailing Address:	
3681 Stokes Dr.	· 		
Sarasota, FL 34232			
	<del></del>		<del></del>
ARTICLE III - Regis (The Limited Liability Compar business entity with an active	ny cannot serve as its own Register	Office, & Registered Agent's Sed Agent. You must designate an individua	ignature: il or another
The name and the Flori	ida street address of the reg	gistered agent are:	7.00
Pau	ul Messina		管質可
	Name		類ゴー
368	31 Stokes Dr.	_	SER - IT
	Florida street addre	ss (P.O. Box NOT acceptable)	門里
Sara	asota	FL 34232	1000
	City, State, and	l Zip	最后
liability company at registered agent and ag statutes relating to th	t the place designated in thi. gree to act in this capacity. e proper and complete perfo	cept service of process for the abo s certificate, I hereby accept the o I further agree to comply with th formance of my duties, and I am fo ered agent as provided for in Cha	appointment as e provisions of all amiliar with and
·	Registered Agent's Signature	e (REQUIRED)	

(CONTINUED) Page 1 of 2

### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGR	Paul Messina	
	3681 Stokes Dr.	<del></del>
	Sarasota, FL 34232	<del></del>
<del></del>		
•		<del></del>
		<del></del>
		<del></del>
		<del></del>
(Use attachment if necessary)		- 201
(Use attachment if necessary)  LE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	be date of filing: (PF) be specific and cannot be more than five business  F	TAR. 1
LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	be specific and cannot be more than five business	TAR. 1
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	be specific and cannot be more than five business.	TAR. 1
LE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a me	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury	AR 上
LE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of this document constitute that the facts stated Paul Messina	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury	2000 prid AM 11: 46

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)