

L13000014139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

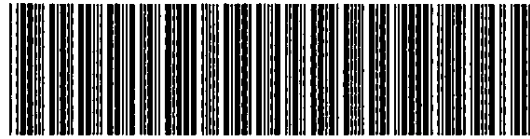
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/11/13--01010--019 **125.00

Effective Date

1/23/13

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JAN 25 PM 4: 23

JAN 28 2013

T. HAMPTON

FORM-210

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Aluminum & Siding Supply, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jacob Creighton
Name of Person

Aluminum & Siding Supply, LLC
Firm/Company

2013 N. East Ave.
Address

Panama City, Fl. 32405
City/State and Zip Code

JakeCreighton78@yahoo.com (all lower case)
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacob Creighton at (850) 348-6254
Name of Person Area Code & Daytime Telephone Number

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 (additional copy is enclosed)
- \$160.00 Filing Fee, 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 Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

13 JAN 25 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 14, 2013

JACOB CREIGHTON
2013 N EAST AVE
PANAMA CITY, FL 32405

SUBJECT: ALUMINUM & SIDING SUPPLY, LLC
Ref. Number: W13000002661

We have received your document for ALUMINUM & SIDING SUPPLY, 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):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Most financial institutions require the name(s) and address(es) of the manager(s) - MGR's or Managing Member(s) - MGRM's to be reflected on our records in order for the business entity to open a bank account. You may wish to revise your document to include the name, address, and title of each manager or managing member.

Please return the corrected original and one copy of 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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 613A00001003

Effective Date 1/23/13

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Aluminum & Siding Supply, LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2013 N. East Ave.
Panama City, FL
32405

same

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jacob Creighton
Name

810 1/2 A Oak Avenue Panama City Florida 32401
Florida street address (P.O. Box NOT acceptable)

FL
City, State, and 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, F.S..

[Handwritten Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager ✓

"MGRM" = Managing Member

(MGR) Jacob Creighton

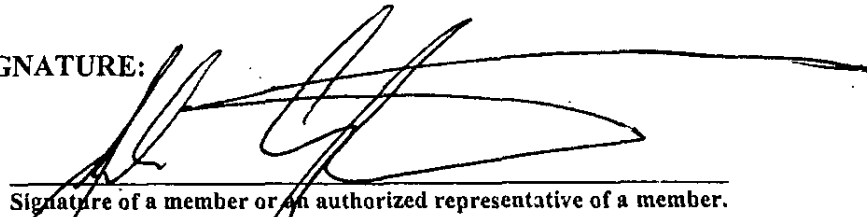
Name and Address:

Jacob Creighton
810 1/2 A Oak Avenue
Panama City Florida 32401

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1/23/13 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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

(In accordance with section 608.408(3), Florida Statutes, 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.)

Jake Creighton

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE
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13 JAN 25 PM 4:23