

L15000001632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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12/04/14--01006--029 **160.00

W14-74149

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JAN -2 PM 1:39

FILED

JAN 16 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Good News Construction Services, 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:

Tiffini P Brown
Name of Person

Good News Construction Services, LLC
Firm/Company

PO Box 7462
Address

Jupiter, FL 33468
City/State and Zip Code

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

For further information concerning this matter, please call:

Tiffini P Brown at (561) 906-5763
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
15 JAN -2 AM 10:00
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

December 12, 2014

TIFFINI

~~TIFFINI~~ P BROWN

PO BOX 7462

JUPITER, FL 33468

~~JUPITER~~

SUBJECT: ~~GOOD NEWS CONSTRUCTION SERVICES, LLC~~ Brown Mechanical Service,
Ref. Number: W14000074149 LLC

We have received your document for ~~GOOD NEWS CONSTRUCTION SERVICES, LLC~~ *Brown Mechanical Service, LLC* and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Tim Burch
Regulatory Specialist II

Letter Number: 814A00026342

*Please note the changes made on this application.
I spoke w/ someone at the division of corporations and they
advised me to do the changes and mail back to you.
Please call me with any questions at
561-906-5763.*

*Thank you,
Tiffini P. Brown*

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~Good News Construction Services, LLC~~ Brown Mechanical Service, 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:

1012 Mohican Blvd
Jupiter, FL 33458

PO Box 7462
Jupiter, FL 33468

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:

Tiffini P Brown
Name
1012 Mohican Blvd
Florida street address (P.O. Box **NOT** acceptable)
Jupiter FL 33458
City Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 605, F.S..

Tiffini P. Brown
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Richard S Brown

1012 Mohican Blvd

Jupiter, FL 33458

~~AMBR~~

~~Richard S Brown~~

~~1012 Mohican Blvd~~

~~Jupiter, FL 33458~~

AMBR

Tiffini P Brown

1012 Mohican Blvd

Jupiter, FL 33458

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Tiffini P. Brown

Signature of member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

Tiffini P. Brown

Typed or printed name of signer

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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TALLAHASSEE, FLORIDA