

L150000061537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

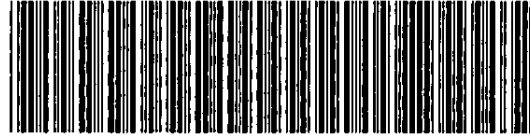
(Business Entity Name)

(Document Number)

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

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03/17/15--01032--002 \*\*130.00

EFFECTIVE DATE  
3-11-15

STATE  
TALLAHASSEE, FLORIDA

15 MAR 17 PH12:20

FILED

APR - 8 2015

T. BROWN

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ALL AMERICAN Mobile Welding "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:

CARL Whitney  
Name of Person

All American mobile welding LLC  
Firm/Company

6799 32<sup>nd</sup> NTH  
Address

St Petersburg FL 33702  
City/State and Zip Code

Carl Whitney 1967 at g mail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARL Whitney at (727) 642-3523  
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

EFFECTIVE DATE

3-11-15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALL AMERICAN Mobile Welding LLC

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

FILED  
15 MAR 17 PM 12:20  
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

6799 32<sup>st</sup>  
St Petersburg FL  
33702

Mailing Address:

6799 32<sup>st</sup>  
St Petersburg FL  
33702

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:

CARL Whitney  
Name  
6799 32<sup>st</sup>  
Florida street address (P.O. Box **NOT** acceptable)  
St Petersburg FL 33702  
City 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 605, F.S.

Carl Whitney  
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:**

CARL Whitney  
6799 32<sup>nd</sup> ST N  
ST PETERSBURG FL  
33702

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 3/11/15 (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:**

Carl Whitney

Signature of a 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.)

CARL Whitney

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)