# L17000023416

(Requestor's Name)		
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		!

Office Use Only



300291986593

01/26/17--01014--021 \*\*155.00



V HERRING JAN 31 2017 DATE 1/92/17

New Filing Section
Division of Corporations
P.O. Box 6327 Tallahassee, Florida 32314

SUBJECT: Merino Crane Service LLC

I have enclosed the original and one copy of the Articles of Organization. You will also find my check for \$155.00 to cover the cost of the Filing Fees, Certified Copy of the Articles of Organization and Fee for Registered Agent Designation for the above named LLC.

Sincerely,

Janai Merino

Please send accepted Articles of Organization to the following address: Janai Merino, 1005 SW 33<sup>rd</sup> Street, Cape Coral, Fl., 33914

### FILED

# 2017 JAN 26 PM 3: 48

SECTION OF STATE TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -Name:

The name of the Limited Liability Company is: Merino Crane Service LLC

ARTICLE II -Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1005 SW 33<sup>rd</sup> Street, Cape Coral, FL. 33914

ARTICLE III -Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Janai Merino, 1005 SW 33<sup>rd</sup> Street, Cape Coral, FL. 33914

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. L 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.

Registered Agent's Signature

Article IV Manager(s) or Managing Member(s)

<u>Title</u> <u>Name and Address</u>

AMBR Janai Merino

1005 SW 33rd Street

Cape Coral, FL. 33914

#### FILED

2017 JAN 26 PM 3: 48

Article V - Management (Check box if applicable.)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager -managed company.

ARTICLE V: Effective Date

The effective date is WHEN FILED

Signature of a member or an authorized representative of a member

Janai Merino

(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.)

Typed or printed name of signee

#### Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)