

L030000048408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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EFFECTIVE DATE

1-1-04

RECEIVED

03 DEC -1 AM 9:31

DIVISION OF CORPORATION

FILED

03 DEC -1 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC - 1 2003

TRANSMITTAL LETTER

EFFECTIVE DATE
1-1-04

TO: Registration Section
Division of Corporations

SUBJECT: POPE Michael Painting 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:

Michael S. Pope
(Name of Person)

Michael Pope Painting CO LLC
(Firm/Company)

PO Box 583
(Address)

Crawfordville AL 32327
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael S. Pope at (Home) 850-926-3107
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
03 DEC -1 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE
1-1-04

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Michael Pope Painting LLC

ARTICLE II - Address:

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

Principal Office Address:

14 Lake Side Court
Crawfordville FL 32327

Mailing Address:

P.O. Box 583
Crawfordville, FL 32327

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

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

Michael E. Pope
Name
14 Lake Side Court
Florida street address (P.O. Box NOT acceptable)
Crawfordville FL 32327
City, State, and Zip

FILED
03 DEC -1 AM 10:00
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 608, F.S..

Michael E. Pope
Registered Agent's Signature

(CONTINUED)

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

Name and Address:

Managing member

Michael Pope
14 Lakeside Cove
Crawfordville AL 36327

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Use attachment if necessary)

Effective date shall be 1-1-04

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Michael E. Pope
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.)

Michael E. Pope
Typed or printed name of signee

FILED
03 DEC - 1 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)