

L04 000002815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

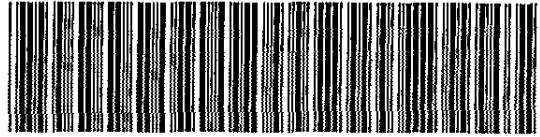
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN - 7 PM 12:39

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L04-2815
JR

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Morris Wilson, 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:

Morris P Wilson
(Name of Person)

Running Yard Flooring / Installations & Repairs
(Firm/Company)

2544 Constitution Blvd
(Address)

Sarasota, FL 34231
(City/State and Zip Code)

For further information concerning this matter, please call:

Morris Wilson at (941) 926-7206
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

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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

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Morris Wilson, 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:

2544 Constitution Blvd

Sarasota, FL 34231

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

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

Morris Wilson

Name

2544 Constitution Blvd

Florida street address (P.O. Box NOT acceptable)

Sarasota

FLORIDA 34231

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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, Florida Statutes..

Morris P Wilson

Registered Agent's Signature

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:

MGR = MORRIS WILSON
2544 CONSTITUTION BLVD
SARASOTA, FL 34231

MGRM HARRY BECKHANS
2544 CONSTITUTION BLVD
SARASOTA, FL 34231

(Use attachment if necessary)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

REQUIRED SIGNATURE:

Morris Wilson
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.)

MORRIS WILSON
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)