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## TRANSMITTAL LETTER

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 850-487-6051

SUBJECT: PIONEER HOME REPAIR LLC

Enclosed are an original and one copy of the articles of Organization For Florida Limited Liability Company.

FROM: GENE TURNBAUGH 668 KROEGEL AVENUE SEBASTIAN, FLORIDA 32958 772-589-4251

IALI AHASSEE TO STATE



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 14, 2004

GENE TURNBAUGH 668 KREOGEL AVENUE SEBASTIAN, FL 32958

SUBJECT: PIONEER HOME REPAIR LLC

Ref. Number: W04000001786

OL JAN 26 AM 9: 46

We have received your document for PIONEER HOME REPAIR LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6097.

Letter Number: 804A00002569

Marsha Thomas Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CON **ARTICLE I-Name:** 

The name of the Limited Liability Company shall be: PIONEER HOME REPAIR LLC

**ARTICLE II-Address:** 

The mailing address and street address of the principal office of the Limited Liability Company is: 668 KREOGEL AVENUE, SEBASTIAN, FLORIDA 32958

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

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

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..

ARTICLE IV- Management (Check box if applicable.)

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

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.)

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)