## L04000020836

A.G.M. Cabinets 139 Clearlake Rd. #4 Cocoa, FL 32922 Phone: (321) 536-9067		
(City/State/Zip/Phone #)		
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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 3, 2004

A.G.M. CABINETS 139 CLEARLAKE RD. #4 COCOA, FL 32922

SUBJECT: A.G.M. CABINETS LLC Ref. Number: W04000004693 MINITED SEE, FLORIDA

We have received your document for A.G.M. CABINETS LLC and your check(s) totaling \$155.00. 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) 245-6043.

Letter Number: 104A00007228

Joey Bryan Document Specialist

District of Commentions D.O. DOV COOK Well-1-1-1-13-20014

## Articles Of Organization For Florida Limited Liability Company



ARTICLE I - Name:

The name of the Limited Liability Company is

e Limited Liability Company is

A.G.M. Cabinets

ARTICLE II - Address:

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

139 Clearlake Road #4 Cocoa, FL 32922

ARTICLE III - Duration:

The Limited Liability Company shall dissolve no later than December 31, 2070.

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

ALVIN G. MASSEY 2028 STEWART ROAD # 44 MELBOURNE, CLORING 32935

ARTICLE V - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: <u>NONE</u>.

Member 3-5-04

the 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.)

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is A.G.M. Cabinets

LLC

2. The name and the Florida street address of the registered agent is:

ALVIN G. MASSEY
2028 STENMET ROMD # 44
MELBOURNED, ELANIA 32975

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.

Registered Agent 3-5-04

Filing Fee: \$ 25 for Designation of Registered Agent

