

L040000023857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

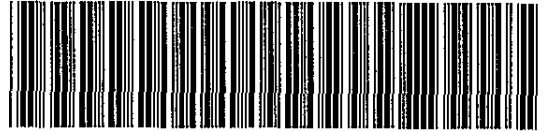
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 APR 30 AM 9:42

~~W04-9672~~  
L04-23857

L04-2385,

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Tropical Rescreen Co. LLC

(Name of Limited Liability Company)

FEIN# 650856700

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marilynn Gillette

(Name of Person)

Tropical Rescreen Co. LLC

(Firm/Company)

5212 9th Avenue Drive West

(Address)

Bradenton, Florida 34209

(City/State and Zip Code)

For further information concerning this matter, please call:

Marilynn Gillette

(Name of Person)

at ( 941 )

795-8250

(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

March 10, 2004

MARILYNN GILLETTE  
TROPICAL RESCREEN CO. LLC  
5212 9TH AVENUE DRIVE WEST  
BRADENTON, FL 34209

SUBJECT: TROPICAL RESCREEN CO. LLC  
Ref. Number: W04000009672

We have received your document for TROPICAL RESCREEN CO. LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

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) 245-6918.

Nanette Causseaux  
Document Specialist Supervisor

Letter Number: 204A00016117

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Tropical Rescreen Co. LLC

FEIN # 65 0850700

**ARTICLE II - Address:**

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

**Principal Office Address:**

5212 9th Avenue Drive West

Bradenton, Florida 34209

**Mailing Address:**

5212 9th Avenue Drive West

Bradenton, Florida 34209

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

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

Marilynn Gillette

Name

5212 9th Avenue Drive West

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

Bradenton

FLORIDA 34209

City, State, and Zip

*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..*



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:**

MGRM

Marilynn Gillette

5212 9th Avenue Drive West

Bradenton, Florida 34209

MGRM

Steven Gillette

712 Wintergarden Drive

Sarasota, Florida 34243

MGRM

James Gillette

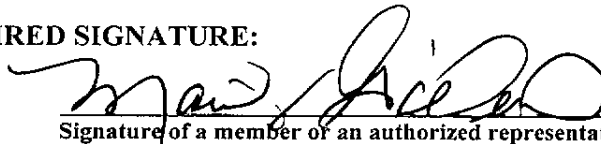
5212 9th Avenue Drive West

Bradenton, Florida 34209

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**



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.)

Marilynn Gillette

Typed or printed name of signer

**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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 MAR 30 AM 9:43