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2004 MAR 22 A 10: 25

SECRETARY OF STATE
FLORIDA



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TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

2004 MAR 22 A 10: 25

SUBJECT: KEYSTONE SALES & SERVICE LLC
(Name of Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

DAVID C. DARTT

(Name of Person)

KEYSTONE SALES & SERVICE LLC

(Firm/Company)

4865 SR 60 EAST

(Address)

LAKE WALES, FL 33898

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID C. DARTT at (863) 676-6627

(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

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED

2004 MAR 22 A 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

KEYSTONE SALES & SERVICE 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:

KEYSTONE SALES & SERVICE LLC

SAME

4865 SR 60 EAST

LAKE WALES, FL 33898

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

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

DAVID C. DARTT

Name

4865 SR 60 EAST

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

LAKE WALES, FLORIDA 33898

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..

David C. Dartt

Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows: 2008 MAR 22 A 10: 25

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGRM

DAVID E. DARTT

4865 SR 60 EAST

LAKE WALES, FL 33898

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

DAVID E. DARTT
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.)

DAVID E. DARTT

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)

155.00 TOTAL