

LO4000031870

Rendell M. Strong
(Requestor's Name)

627 David Clemons
(Address)

(Address)

Quincy Fla 32351
(City/State/Zip/Phone #)

☒ PICK-UP

☐ WAIT

☐ MAIL

Installers

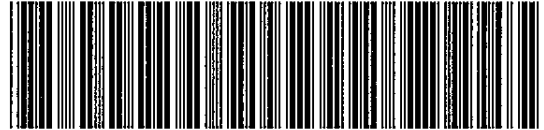
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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LO4-31870

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Installers
(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:

Rendell M. Strong
(Name of Person)

Installers
(Firm/Company)

677 David Clemons Rd
(Address)

Quincy Fl 32351
(City/State and Zip Code)

For further information concerning this matter, please call:

Mary E. Strong at (850) 639-8433
(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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Installers L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

627 David Clemens Rd
Quincy Fla 32351

Mailing Address:

627 David Clemens Rd
Quincy, Fla 32351

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

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

Rendell Strong
627 David Clemens Rd
Name

Quincy Fla 32351
Florida street address (P.O. Box **NOT** acceptable)

FL
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, F.S.

Rendell M. Strong
Registered Agent's Signature

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(CONTINUED)

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:

A/A

A/A

Manager

Rendell M. Strong
627 David Clemons RD
Quincy Fla 32351

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Rendell M. Strong

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.)

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)

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