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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LLC — Donald B. Anthony JR. Patching + Sealing
Name of Limited Liability Company) LLC.

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

Please return all correspondence concerning this matter to the following:

Donald B. Anthony JR
(Name of Person)

Donald B. Anthony JR. Patching + Sealing LLC
(Firm/Company)

15703 County Line RD
(Address)

ODESSA FLA. 33556
(City/State and Zip Code)

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For further information concerning this matter, please call.

Donald B. Anthony JR at 813 245-4966 cell
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
408 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**

ARTICLE I - Name:

The name of the Limited Liability Company is:

DONALD B. ANTHONY JR PATCHING + SEALING LLC.

ARTICLE II - Address:

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

Principal Office Address:

15703 COUNTY LINE RD.
ODESSA FLA 33556

Mailing Address:

15703 COUNTY LINE RD.
ODESSA FLA. 33556

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

DONALD B. ANTHONY JR
Name

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

1021 ALTAMONT LA. ODESSA FL FLORIDA 33556 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

Donald B Anthony Jr

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

The name and address of each Manager or Managing Member is as follow "

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

Donald B. ANTHONY JR
15703 COUNTY LINE RD.
ODESSA FL. 33556

(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.)

Donald B. ANTHONY JR
Typed or printed name of signer.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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)