

104000069068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer: _____

Name
Availability

Document
Examiner

DCC

Updater

DCC

Office Use Only

Updater
Verifier

DCC

Acknowledgement

DCC

W.P. Verifier

DCC



500041243065

09/22/04--01062--002 **125.00

FILED

04 SEP 22 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

04 SEP 22 PM 12:43

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Pacos Sheet Rock Finishers, LLC
(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:

Gerardo Vivas Lamas
(Name of Person)

808 Locust Rd (Firm/Company)

WHIGHAM, GA 34897-3320

901 NEXUS 729 Parkville, Georgia, FL
(Address)

Georgia
(City/State and Zip Code)

For further information concerning this matter, please call:

Gerardo Vivas Lamas at (229) 7624547
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|---|

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

FILED
04 SEP 22 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Palacios Sheet Rock Finishers LLC

ARTICLE II - Address:

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

Principal Office Address:

808 Lacey Blvd
WHiGHAM, G.A 39897-3320

Mailing Address:

Gaithna FL 32332
P.O. Box 987 Parkin
Ellis Circle Lot 129

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

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

Gemma Vivas Lemos
Name

Ellis Circle Lot 129 #14
Florida street address (P.O. Box NOT acceptable)

Gaithna FL 32332
City, State, and Zip

FILED
04 SEP 22 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..

Gemma Vivas Lemos
Registered Agent's Signature

(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:

MGRM

Canaro Vivas Lemos
Orlando FL 32832
P.O. Box 987.09

MGRM

Pedro E. Vivas
Orlando FL 32832
P.O. Box 987.09

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Canaro Vivas Lemos
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.)

Canaro Vivas Lemos
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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 SEP 22 PM 12:51

FILED