

L04000069437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

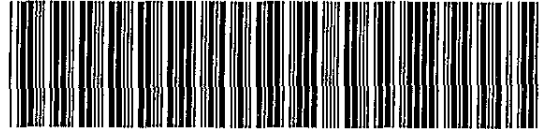
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700041241307

09/23/04 --01056--006 **125.00

FILED
04 SEP 23 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
04 SEP 23 PM 1:13
OFFICE OF THE SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: William Lewis Jones Believers Choice Contractors 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:

Cesar E. Diaz
(Name of Person)

Believers Choice Contractors LLC
(Firm/Company)

909 weeks Rd. Ft Walton Beach FL
(Address)

Ft Walton Bch FL 32547
(City/State and Zip Code)

For further information concerning this matter, please call:

Cesar E. Diaz at (850) 368 0677
(Name of Person) (Area Code & Daytime Telephone Number)

FILED
04 SEP 23 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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

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"

William Lewis Jones

909 weeks Rd.

FWB Fl 32547

"MGRM"

Cesar E Diaz

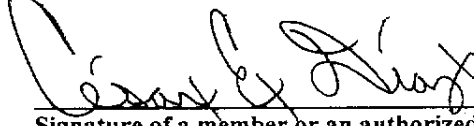
909 weeks Rd.

FWB Fl 32547

(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.)

Cesar E Diaz

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 23 PM 1:20

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Believers Choice Contractors LLC

ARTICLE II - Address:

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

Principal Office Address:

909 weeks Rd.
Ft. Walton Beach
FL 32547

Mailing Address:

909 weeks Rd.
Ft. Walton Beach
FL 32547

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

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

Cory A. Diaz / ~~William J. Jones~~
Name

909 weeks Rd.
Florida street address (P.O. Box **NOT** acceptable)
Ft. Walton Beach FL 32547
City, State, and Zip

FILED
04 SEP 23 PM 1:20
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.

Cory A. Diaz / ~~William J. Jones~~
Registered Agent's Signature

(CONTINUED)