

L04000072399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

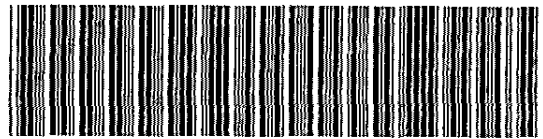
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

10/6/04
MSE



400041355684

10/05/04--01053--012 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 OCT -5 AM 11:33

FILED

Jimmy Renkiewicz
2284 Cyt. R.D. 608
Bushnell, FLA 33513
1-352-793-5972

FILED

04 OCT -5 AM 11:33

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JIMMY BENKIEWICZ CONCRETE, 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:

JIMMY BENKIEWICZ
(Name of Person)

JIMMY BENKIEWICZ CONCRETE
(Firm/Company)

2284 CR. 608
(Address)

BUSHNELL FL 33513
(City/State and Zip Code)

For further information concerning this matter, please call:

JIMMY BENKIEWICZ at (352) 793-5972
(Name of Person) (Area Code & Daytime Telephone Number)

RECEIVED
TALLAHASSEE, FLORIDA

04 OCT - 5 AM 11:34

FILED

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JIMMY RENKIEWICZ CONCRETE, 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:

JIMMY RENKIEWICZ CONCRETE
2284 C.R. 608
BUSHNELL, FL 33513

SAME

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

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

JIMMY RENKIEWICZ
Name
2284 C.R. 608
Florida street address (P.O. Box NOT acceptable)
BUSHNELL FL 33513
City, State, and Zip

FILED
04 OCT -5 AM 11:34
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..

Jimmy Renkiewicz
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:

MGR

JIMMY RENKIEWICZ
2284 C.R. 608
BUSHNELL, FL 33513

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Jimmy Renkiewicz
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.)

JIMMY RENKIEWICZ
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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 OCT -5 AM 11:34

FILED