

L040000074166

(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

Updater
Verifier

DCC

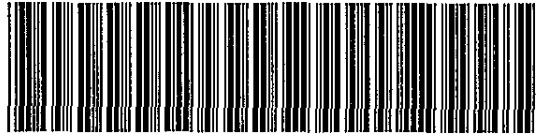
Acknowledgement

DCC

W. P. Verifier

DCC

Office Use Only



900041707199

EFFECTIVE DATE
10/26/04

10/12/04--01019--011 **130.00

FILED
2004 OCT 12 AM 11:24
SEATTLE
WASHINGTON

Transmittal Letter

Department of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: L & K HOME IMPROVEMENTS, LLC

(Proposed Limited Liability Corporate name – must include suffix)

Enclosed is an original and one(1) copy of the articles of organization for Florida Limited Liability Company and a check for:

☐ \$125.00
Filing Fee
& Designated
Registered Agent.

☒ \$130.00
Filing Fee/RA
& Certificate of Status

☐ \$155.00
Filing Fee
& Certified Copy
ADDITIONAL COPY REQUIRED

☐ \$160.00
Filing Fee,
Certified Copy
& Certificate of Status

FROM: LINDA FENDER
Name (Printed or Typed)

2358 FAIRGREN AVE
Address

DELTONA, FL 32738
City, State & Zip

386-789-7138
Daytime Telephone Number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is: L & K HOME IMPROVEMENTS, LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 2358 FAIRGREN AVE, DELTONA, FL 32738

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

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

LINDA FENDER

Name

2358 FAIRGREN AVE

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

DELTONA, FL 32738

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.


Registered Agent's Signature

SECRET
OCT 12 2004
FBI

ARTICLE IV – Management (Check box if applicable.)

- ☐ The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager managed company.

The name and address of each Manager or Managing Member is as follows:

TITLE

NAME & ADDRESS

MGR

LINDA FENDER

2358 FAIRGREN AVE, DELTONA, FL 32738

MANAGING MEMBER:

KENNETH NEAL

2358 FAIRGREN AVE, DELTONA, FL 32738

ARTICLE V – Effective Date

The Limited Liability Company requested effective date is Oct 26, 2004


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.)

LINDA FENDER

Typed are printed name of signee

SECRETARY OF STATE
OCT 12 A 11:24

FILED