

L04000076823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

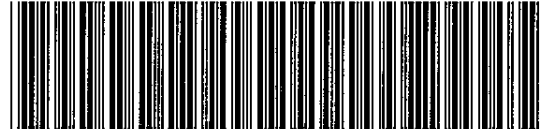
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
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*Architectural Trim &
Moulding Systems, LLC*

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- ☐ Art of Inc. File _____
- ☐ LTD Partnership File _____
- ☐ Foreign Corp. File _____
- ☒ L.C. File _____
- ☐ Fictitious Name File _____
- ☐ Trade/Service Mark _____
- ☐ Merger File _____
- ☐ Art. of Amend. File _____
- ☐ RA Resignation _____
- ☐ Dissolution / Withdrawal _____
- ☐ Annual Report / Reinstatement _____
- ☐ Cert. Copy _____
- ☒ Photo Copy _____
- ☐ Certificate of Good Standing _____
- ☐ Certificate of Status _____
- ☐ Certificate of Fictitious Name _____
- ☐ Corp Record Search _____
- ☐ Officer Search _____
- ☐ Fictitious Search _____
- ☐ Fictitious Owner Search _____
- ☐ Vehicle Search _____
- ☐ Driving Record _____
- ☐ UCC 1 or 3 File _____
- ☐ UCC 11 Search _____
- ☐ UCC 11 Retrieval _____

Signature _____

Requested by: *WC*

Name _____

Date *10/22*

Time *11:00*

Walk-In _____

Will Pick Up _____

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ARTICLES OF ORGANIZATION
OF
ARCHITECTURAL TRIM & MOULDING SYSTEMS, L.L.C.
(a Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The undersigned executes these Articles of Organization to form a limited liability company under the laws of the State of Florida, and declares that the following articles shall serve as the charter and authority for the conduct of business of the limited liability company.

ARTICLE I.
NAME

The name of the limited liability company is ARCHITECTURAL TRIM & MOULDING SYSTEMS, L.L.C.

ARTICLE II.
ADDRESS

The mailing address and street address of the principal office of the limited liability company is:

Principal Office Address:

1751 12th St. E.
Palmetto, Fl 34221

Mailing Address:

1751 12th St. E.
Palmetto, Fl 34221

ARTICLE III.
REGISTERED AGENT, REGISTERED OFFICE,
REGISTERED AGENT'S SIGNATURE

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

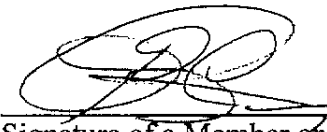
STEVEN MICHAEL KOSOFF
1751 12th St. E.
Palmetto, Fl 34221

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 Signature



Signature of a Member or 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)

RICHARD B. CARY

Typed or Printed Name of Signee