

L040000 78399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

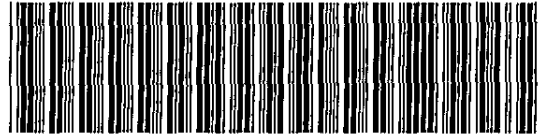
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

BK

Office Use Only



000040112500

10/28/04---01037---024 \*\*125.00

RECEIVED  
04 OCT 28 PM 2:48  
STATE  
DEPARTMENT OF CORPORATIONS  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
04 OCT 28 AM 9:06  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE



UCC FILING & SEARCH SERVICES, INC.  
526 East Park Avenue  
Tallahassee, Florida 32301  
(850) 681-6528

**HOLD**  
FOR PICKUP BY  
UCC SERVICES  
OFFICE USE ONLY

October 28, 2004

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Benjamin Pazar Home Repairs, LLC

**Filing Evidence**

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

**Retrieval Request**

- ☐ Photocopy
- ☐ Certified Copy

**Type of Document**

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

**ARTICLES OF ORGANIZATION OF  
BENJAMIN PAZAR HOME REPAIRS, LLC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

FILED  
04 OCT 08 AM 9:06  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE I — Name:**

The name of the Limited Liability Company is:

**BENJAMIN PAZAR HOME REPAIRS, LLC**

**ARTICLE II — Address:**

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

7466 Swallow Run  
Winter Park, FL 32792

**ARTICLE III — Duration:**

The period of duration for the Limited Liability Company shall be in perpetuity.

**ARTICLE IV — Management**

The Limited Liability Company is to be managed by the members and the name and address of the managing member are:

**BENJAMIN PAZAR**  
7466 Swallow Run  
Winter Park, FL 32792

**ARTICLE V — Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be in accordance with the Regulations of the Limited Liability Company.

## **ARTICLE VI — Members' Rights to Continue Business**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be in accordance with the Regulations of the Limited Liability Company.

## **ARTICLE VII — Initial Registered Agent and Registered Agent's Address**

The name and mailing address of the initial registered agent of the Limited Liability Company are:

**DeCubellis, Meeks & Uncapher, P.A.  
837 North Garland Avenue  
Orlando, Florida 32801**

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 27 day of October, 2004.

  
BENJAMIN PAZAR

(In accordance with §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.)

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.**

1. The name of the Limited Liability Company is:

**BENJAMIN PAZAR HOME REPAIRS, LLC**

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

DeCubellis, Meeks & Uncapher, P.A.  
837 North Garland Avenue  
Orlando, Florida 32801

*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.*

DeCubellis, Meeks & Uncapher, P.A.

By: \_\_\_\_\_

Kenneth R. Uncapher, Vice-President

**Filing Fee: \$35 for Designation of Registered Agent**