

LOS0000015538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

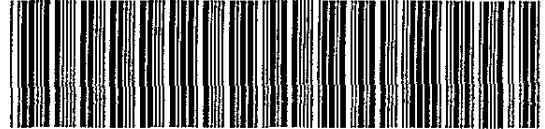
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TALLAHASSEE, FLORIDA

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LOS-15538  
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***Roberts Framing, Trim, & Vinyl Siding, LLC***

***1360 SW Tompkins Street***

***Lake City, Florida 32024***

***386 - 752-7468***

***fax\*\* 386-758-8121***

State of Florida  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Name of LLC : Roberts Framing, Trim, & Vinyl Siding, LLC

Mailing address : 1360 SW Tompkins Street , Lake City, Florida 32024

Telephone : 386 - 752 - 7468

Fax : 386 - 758 - 8121

Contact person : Scott Roberts

Registered Agent : Scott Roberts , 1360 SW Tompkins Street, Lake City, Fl., 32024

Enclosures:

Articles of Organization

Check payable for the amount of \$130.00

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Roberts FRAMING, Trim + Vinyl Siding, 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:

Mr. Scott Roberts  
(Name of Person)

Roberts Framing, Trim, + Vinyl Siding, LLC  
(Firm/Company)

1360 SW Tompkins Street  
(Address)

LAKE CITY, Florida 32024  
(City/State and Zip Code)

For further information concerning this matter, please call:

Mr. Scott Roberts at (386) 752-7468  
(Name of Person) (Area Code & Daytime Telephone Number)

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

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TALLAHASSEE, FLORIDA

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Roberts FRAMING, TRIM + Vinyl Siding, LLC

### ARTICLE II - Address:

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

#### Principal Office Address:

1360 SW Tompkins St  
LAKE CITY, FL 32024

#### Mailing Address:

1360 SW Tompkins St.  
LAKE CITY, FL 32024

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

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

Scott Roberts

Name

1360 SW Tompkins Street

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

LAKE CITY FL 32024

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.*

Scott Roberts

Registered Agent's Signature

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TALLAHASSEE, FLORIDA

(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

MGR

**Name and Address:**

Scott Roberts

1360 SW Tompkins Street  
LAKE CITY, FL 32024

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Scott Roberts  
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.)

Scott Roberts  
Typed or printed name of signer

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**
- \$ 30.00 Certified Copy (Optional)**
- \$ 5.00 Certificate of Status (Optional)**

**FILED**  
2005 FEB 11 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA