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| (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: |
| |
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| |
| 317 |
| Office Use Only |



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ECRETARY OF TAMES

BLUANASSEF, FILTER

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TRANSMITTAL LETTER

| TO: Registration Se Division of Co. | | | | |
|--|---|--|--|-------------------|
| subject: Dan | Name of Limited | ne Lemalelin I Liability Company) | q & Repain LL | ے |
| The enclosed Articles of | Organization and fee(s) are so | ubmitted for filing. | | |
| Please return all corresp | ondence concerning this matte | r to the following: | | |
| Da | nny Hall | Name of Person) | | |
| Danny Ha | Ul Home Ray | modeling & Re | epair, LLC | |
| 2710 | Long Ba | Address) | | |
| Fe | mandina t | Sch, FIA 35 State and Zip Code) | SECRETARY OF SULLAHASSEE, TLCHILL | 70 0 0 7 |
| For further information | concerning this matter, please | call: | | ! |
| Danny H | of Person) | at (Area Code & Daytime To | elephone Number) | |
| Enclosed is a check fo | 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) | |
| Regist | ET ADDRESS: ration Section | MAILING A Registration S | ection | |

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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:

Danny Hall Remodeling and Repair, LL

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2767 Long Boat Dr. Fernandina Bch FlA 32034 2767 LONG BOUTDY FORVENCINA BOUTDY 320361

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

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

Nan

Florido et estados (RO, Roy NOT acceptable)

Ferrandina RM 3 2034

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

(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 MCr R All WA HALL TO LOUIS ROUTH TO LOUIS ROUTH (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE:

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

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)