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(Requestor's Name)
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(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		-
SUBJECT: Ron's Repel	Liability Company)	nce LLC
The enclosed Articles of Organization and fee(s) are sub	omitted for filing.	
Please return all correspondence concerning this matter	to the following:	五岁 55
Ronald V	ThasL	HAR 18
(N	ame of Person)	888
Roals Repair o	+ Main teno	OSHAR 18 PH 2: 01 VALLAHASSEE, FLORID
· <i>y</i> (F	im/Company)	800
3852 Matt n	(Address)	
Ta-11, F1, (City/S	3 Z 3 // State and Zip Code)	<del></del>
For further information concerning this matter, please ca	all:	
Ronald V. Thrank (Name of Person)	at ( <u>850</u> ) <u><b>899</b></u> (Area Code & Daytime Tel	lephone 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:	MAILING AI	DDRESS:

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

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

The name of the Limited Liability Compar	ny is:
-	
Ron's Regain of	Maintenance LLC %
ARTICLE II - Address:	•
	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
	3852 Matt wing Load
ARTICLE III - Registered Agent, Regis	tered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Regis  The name and the Florida street address of	
The name and the Florida street address of	f the registered agent are:
The name and the Florida street address of	the registered agent are:  V. Thask  Name
The name and the Florida street address of	the registered agent are:  V. Thask  Name
The name and the Florida street address of Roman Address	the registered agent are:  V, Tha, L  Name  Thum RL  eet address (P.O. Box NOT acceptable)
The name and the Florida street address of Roman Address	the registered agent are:  V. Thask  Name

Registered Agent's Signature

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED)

Page 1 of 2

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

<u>Fitle:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Membe	er en
MERM	Ronald U. Thrack 3852 matteria, Rd. Fall. Fl. 32311
	- For St 1
	THE STATE OF THE S
	SEE 2.
	. 9
(Use attachment if necessary)	
NOTE: An additional articl	e 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 that the facts stated herein are true.)

Ronald V, Thrush
Typed or printed name of signee

## 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)