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2005 MAY 16 P 12: 56 SECRETARY OF STATE (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: 魁籍

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TRANSMITTAL LETTER

FILED TO: Registration Section Division of Corporations 2005 MAY 16 P 12: 56 SUBJECT: Moore Handyman Service LLC (Name of Limited Liability Company) SECRETARY OF STATE TALLAHASSEE, FLORIDA The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: David F Moore (Name of Person) Moore Handyman Service LLC (Firm/Company) 2338 Tumbleweed Drive (Address) Navarre Fl. 32566 (City/State and Zip Code) For further information concerning this matter, please call: at (_850) 699-4651 (Area Code & Daytime Telephone Number) David F. Moore (Name of Person) Enclosed is a check for the following amount: ☐ \$125.00 Filing Fee **Z** \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRESS:**

(additional copy is enclosed)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	THE LANGE TO SERVICE THE PARTY OF THE PARTY
The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Moore Handyman Service LLC	
ARTICLE II - Address:	
	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2338 Tumbleweed Drive	P.O. Box 5182
Navarre Fl. 32566	Navarre Fl. 32566
The name and the Florida street address of the r David F. Moore	registered agent are:
Name	
2338 Tumbleweed Drive	
Florida street add	dress (P.O. Box NOT acceptable)
Navarre	FL
City, State, a	
liability company at the place designated in t	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and

(CONTINUED)

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

4 1 . .

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	FILED
MGRM	David F Moore 2338 Tumbleweed Drive Navarre Fl 32566	2005 HAY I b P 12: 57 SECRETARY OF STATE TALLAHASSEE, FLORIDA
		A Part of the second of the se
		
(Use attachment if necessary) NOTE: An additional article must REQUIRED SIGNATURE:	st be added if an effective date is req	uested.
Signature of a mem	Professional Profe	mber.
(In accordance with s of this document con that the facts stated	section 608.408(3), Florida Statutes, the execustitutes an affirmation under the penalties of planer in are true.)	tion erjury
David F Moore	Typed or printed name of signee	 ,
Filing Fees		

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)