

LOS000072336

(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:

WOS-31214

167
2848

Office Use Only



600056288096

06/20/05--01026--023 **130.00

RECEIVED
TALLAHASSEE, FLORIDA

05 JUL 15 PM 1:56

FILED



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 27, 2005

ERNEST EUGENE ALBRITTON
1036 29TH STREET NW
WINTER HAVEN, FL 33881

SUBJECT: GENE'S HANDYMAN SERVICE, INC.
Ref. Number: W05000031214

We have received your document for GENE'S HANDYMAN SERVICE, INC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 305A0004337

FILED
05 JUL 15 PM 1:56
SECRETARY OF STATE
TALLAHASSEE
FLORIDA

TRANSMITTAL LETTER

ATX1

TO: Registration Section
Division of Corporations

SUBJECT: GENE'S HANDYMAN SERVICE, INC. L.L.C.
(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:

Ernest Eugene Albritton
(Name of Person)

GENE'S HANDYMAN SERVICE, INC.
(Firm/Company)

1036 29TH STREET NW
(Address)

WINTER HAVEN, FL 33881
(City/State and Zip Code)

For further information concerning this matter, please call:

Ernest E Albritton 863-965-7354
(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

FILED
05 JUL 15 PM 1:56
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

GENE'S HANDYMAN SERVICE, ~~INC.~~ LLC**ARTICLE II - Address:**

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

Principal Office Address:**Mailing Address:**GENE'S HANDYMAN SERVICE, ~~INC.~~ LLC1036 29TH STREET NWWINTER HAVEN, FL 33881GENE'S HANDYMAN SERVICE, ~~INC.~~ LLC1036 29TH STREET NWWINTER HAVEN, FL 33881**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Ernest Eugene Albritton
Name1036 29th Street NW
Florida street address (P.O. Box **NOT** acceptable)Winter Haven FL 33881
City, State, and ZipFILED
05 JUL 15 PM 1:50
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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..

Ernest Eugene Albritton
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

Ernest E Albrighton

"MGR"

Name and Address:Gene's Handyman Service, LLC
1036 29th St NW
Winter Haven, FL 33881

(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 that the facts stated herein are true.)

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)

FILED
05 JUL 19 PM 1:56
TALLAHASSEE, FLORIDA