

L05000102392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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10/13/05--01021--015 **155.00

4/10/18/05

FILED
05 OCT 13 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4p



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 4, 2005

JOHN C. FARNELL, JR.
4265 COQUINA DRIVE
JACKSONVILLE, FL 32250

SUBJECT: JOHN FARNELL CONCRETE
Ref. Number: W05000045743

*Sorry, for the error on
the check, Rep's this time I
have billed correctly.*

We have received your document for JOHN FARNELL CONCRETE and check(s) totaling \$155.00. However, your check(s) and document are being returned for the following:

Please note the money amounts differ on the check. Please send a corrected check for the proper amount. The correct amount is \$155.00.

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6917.

Gretchen Harvey
Document Specialist Supervisor

Letter Number: 305A00060283

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JOHN FARNELL CONCRETE, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

4265 COQUINA DRIVE

Mailing Address:

SAME

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

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

John C. Farnell Jr.
Name

4265 COQUINA DRIVE
Florida street address (P.O. Box **NOT** acceptable)

JACKSONVILLE FL 32250
City, State, and Zip

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CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

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..

John C. Farnell Jr.
Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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

Name and Address:

N/A

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Theresa Farnell
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.)

THERESA FARNELL
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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)