

W05000102428

00789-02826-00671 9/19 off date

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

W05-102428

(Document Number)

Certified Copies 1 Certificates of Status 1

Special Instructions to Filing Officer:

9/19

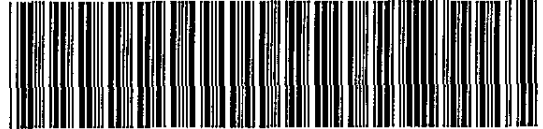
FL LC

W05-44865

Office Use Only

EFFECTIVE DATE
9-13

waited off 8/16



700059657057

09/19/05--01022--026 **160.00

M. HODGES

W05000102428

FILED
05 SEP 19 PM 1:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 28, 2005

JAMES R. NEAVEO
ELITE CRETE SYSTEMS OF FLORIDA & CARIBBE
210-8 CESSNA BLVD.
PORT ORANGE, FL 33436

SUBJECT: ELITE CRETE SYSTEMS OF FLORIDA & CARIBBEAN, LLC
Ref. Number: W05000044865

We have received your document for ELITE CRETE SYSTEMS OF FLORIDA & CARIBBEAN, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on September 19, 2005. Please amend your document 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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 605A00059213

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Elite Crete Systems of Florida & Caribbean, "LLC"
(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:

JAMES R. NEAL
(Name of Person)

Elite Crete Systems of Florida & Caribbean, "LLC"
(Firm/Company)

210-8 Cessna Blvd.
(Address)

Port Orange, Florida 33436
(City/State and Zip Code)

For further information concerning this matter, please call:

James R. Neal at (561) 436-7083
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|--|---|---|--|

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Elite Crete Systems of Florida & Caribbean, "LLC"

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

210-8 Cessna Blvd, Port Orange, FL 32128

Mailing Address:

210-8 Cessna Blvd, Port Orange, FL 32128

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

James R. Neaves, Jr.

Name

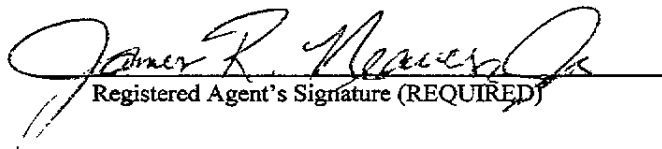
210-8 Cessna Blvd.

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

Port Orange, FL 32128

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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TALLAHASSEE FLORIDA

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:

MGRM

James R. Neaves, Jr.

2124 Springwater Lane

Port Orange, Florida 32128

MGRM

Sean M. Dougan

4315 Caryota Drive

Boynton Beach, Florida 33436

MGRM

James R. Neaves, III

2124 Springwater Lane

Port Orange, Florida, 32128

MGRM

John A. Dougan

4315 Caryota Drive

Boynton Beach, Florida 33436

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: SEPTEMBER 13, 2005 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

John A. Dougan
Typed or printed name of signer

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)