

L05000107792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

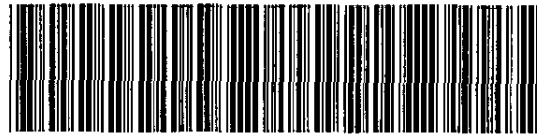
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W05-48721

Office Use Only



400060732474

EFFECTIVE DATE
10/17/05

10/20/05--01017--002 **125.00

SECRET
TALLAHASSEE FLORIDA

05 OCT 21 PM 2:43

FILED



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 25, 2005

JAMES A. ROCHESTER
131 EDGEWATER CIRCLE
SANFORD, FL 32773

SUBJECT: LISA'S PERFECTION MASONARY LLC
Ref. Number: W05000048721

We have received your document for LISA'S PERFECTION MASONARY LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following:

The document must contain the usual business addresses of its managing members or managers.

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) 245-6853.

Leslie Sellers
Document Specialist

Letter Number: 505A00064758

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LISA'S Perfection Masonry
(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 A. Rochester

(Name of Person)

(Firm/Company)

131 edgewater Circle

(Address)

Sanford FL 32773

(City/State and Zip Code)

For further information concerning this matter, please call:

James A. Rochester

(Name of Person)

at (407) 402-4448

(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)

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:

LISA'S Perfection Masonary LLC
(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

RECEIVED
10/17/05

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

131 edgewater circle
Sanford Florida 32773

131 edgewater circle
Sanford Florida 32773

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 AARON LEE ROCHESTER
Name
131 edgewater circle
Florida street address (P.O. Box **NOT** acceptable)
Sanford FL 32773
City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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.

[Signature]
Registered Agent's Signature (REQUIRED)

(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

Name and Address:

MGR

James A. Rochester
131 Edgewater Cir Sanford
FL 32773

MGRM

James A. Rochester
131 Edgewater Cir Sanford
FL 32773

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10/17/05. (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.)

James A. Rochester
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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 OCT 21 PM 2:45

APPROVED
AND
FILED