

05000116394

(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:

Office Use Only



200061658212

11/28/05--01056--018 **130.00

02/12/06/05

FILED
05 NOV 28 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

yp

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STEVE SUNDAL CONSTRUCTION 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:

STEVE SUNDAL

(Name of Person)

STEVE SUNDAL CONSTRUCTION L.L.C.

(Firm/Company)

326 BREAR AVE SUITE #1

(Address)

FORT WALTON BEACH FLORIDA 32548

(City/State and Zip Code)

For further information concerning this matter, please call:

STEVE SUNDAL

(Name of Person)

850 244

9283

(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 NOV 28 PM 2:59
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

STEVE SUNDAL CONSTRUCTION L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

326 BREAM AVE SUITE #1

FORT WALTON BEACH
FLORIDA 32548

Mailing Address:

326 BREAM AVE SUITE #1

FORT WALTON BEACH
FLORIDA 32548

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

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

STEVE SUNDAL

Name

326 BREAM AVENUE SUITE # 1

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

FORT WALTON BEACH FL, 32548

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated 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 the 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, .



Registered Agent's Signature

(CONTINUED)

FILED
65 NOV 28 PM 2:59
SECRETARY OF STATE
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

MGR

Name and Address:

steve sundal 326 bream ave suite #1
fort walton beach florida 32548

(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.)

STEVE SUNDAL

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 NOV 28 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA