

LOG 0000 60095

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

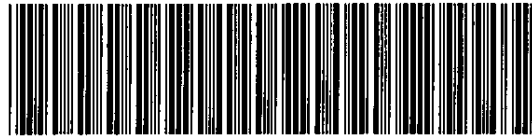
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*EM Date*  
*6-1-06*

Office Use Only

*6/13/06*  
*Just*



500075657525

06/02/06--01044--018 \*\*130.00

06 JUN -2 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

W-26281

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: R & J SPRAY TECH  
(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:

Richard Angelotti  
(Name of Person)

R & J SPRAY TECH  
(Firm/Company)

7014 Arcadian Ct  
(Address)

MOUNT DORA FL 32757  
(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Angelotti at ( 352 ) 536-7041  
(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)

**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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN -2 PM 1:01

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 8, 2006

RICHARD ANGELOTTI  
7014 ARCADIAN CT  
MOUNT DORA, FL 32757

SUBJECT: R & J SPRAY TECH LLC  
Ref. Number: W06000026281

We have received your document for R & J SPRAY TECH LLC and your check(s) totaling \$130.00. 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 June 2, 2006. Please amend your document accordingly.

Please return the original and one copy of 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) 245-6931.

Becky McKnight  
Document Specialist  
New Filing Section

Letter Number: 106A00039500

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN -2 PM 1:01

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

R & J Spray Tech 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:

Mailing Address:

7014 Arcadian Crt  
MOUNT DORA FL 32757

7014 Arcadian Crt  
MOUNT DORA FL 32757

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:

Richard Angelotti  
Name

7014 Arcadian Crt  
Florida street address (P.O. Box **NOT** acceptable)

MOUNT DORA FL 32757  
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.

RA Angelotti  
Registered Agent's Signature (REQUIRED)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN - 2 PM 1:01

FILED

(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:**

Owner "MGR"

Richard Angelotti  
2014 Arcadian Court  
Mount Dora FL 32757

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing:** 5/12/06 6/1/06 (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.)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN -2 PM 1:01

FILED

**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.)

Richard Angelotti  
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)