# L0600067899

(Re	questor's Name)	
(0.4)	dress)	
(Ad	aress)	
. (Ad	dress)	·
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		,

Office Use Only



800076925618

07/06/06--01008--019 \*\*160.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JUL -6 PM 2:3

6 30 06

#### TRANSMITTAL LETTER

TO:

Registration Section

**Division of Corporations** 

DATE:

6-28-06

**SUBJECT:** 

G & R Handyman Services, 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:

Jodi K. Mustoe, Esquire Cox & Rouse, P.A. 240 Lookout Place Maitland, Florida 32751

For further information concerning this matter, please call:

Jodi K. Mustoe, Esquire (407) 644-5225

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRESS:** 

Registration Section Division of Corporations PO Box 6327

Tallahassee, Florida 32314

SECRETARY OF STATE

Filing Fees Included:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy
\$ 5.00 Certificate of Status

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The undersigned, being of legal age and competent to contract, for the purpose of organizing a limited liability company pursuant to the laws of the State of Florida, hereby adopt the following Articles of Organization, and hereby agree and certify as follows:

#### **ARTICLE I**

The name of the Limited Liability Company is:

G & R Handyman Services, LLC

#### <u>ARTICLE II</u>

The principal place of business/mailing address is:

17670 Caudel Rd. Orlando, Florida 32833

The Managers may from time to time designate such other address and place of the principal office of this Limited Liability Company as it may see fit without amendment of these Articles of Organization.

#### ARTICLE III

The initial registered address of this Limited Liability Company and the initial registered agent of the Limited Liability Company shall be:

Jodi K. Mustoe, Esquire Cox & Rouse, P.A. 240 Lookout Place Maitland, Florida 32751

The Limited Liability Company may change its registered agent or the location of its registered office, or both, from time to time without amendment of these Articles of Organization.

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

_	ŀ	3
ſ	-	
ί		ť

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

### **ARTICLE IV**

Registered Agent's Signature

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:	<u>Holdings</u>		
MGR	Gary Stack 17670 Caudel Rd. Orlando, Florida 32833	50% Ownership		
MGRM	Rosellen Stack 17670 Caudel Rd. Orlando, Florida 32833	50% Ownership  ASSEE, FLORIDA		
ARTICLE V				

This Limited Liability Company shall commence existence on June 30, 2006, and shall have perpetual existence unless sooner dissolved according to law.

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.

Gary Stack
Name of signee

Notary State of Florida, County of Orange

Acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_\_, 2006, by Gary Stack, who is Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_ Type of Identification

Produced: Florida DL and who did not take an oath.

NOTARY SIGNATURE VIW R. Mows My Commission Exp

