

Division of Corporations

https://efile.sunbiz.org/scripts/efilcovr.exe

**L06000072109**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H06000184474 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (800)494-3124  
Fax Number : (305)675-2811

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**FLORIDA NATIONAL BUILDERS STUCCO LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

RECEIVED  
06 JUL 19 AM 7:37  
DIVISION OF CORPORATIONS

06 JUL 19 AM 10:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

H06000184474 3

**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I: NAME**

The name of the Limited Liability Company is:

FLORIDA NATIONAL BUILDERS STUCCO LLC

**ARTICLE II: Address**

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

P.O. BOX 979

MIMS, FL 32754

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE**

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

MICHAEL COOP

4530 WELLINGTON LANE

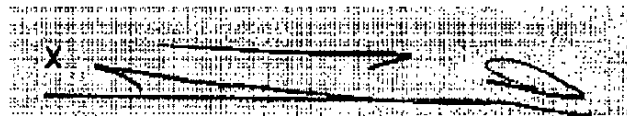
MIMS, FL 32754

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUL 19 AM 10:38

FILED

Having been named as registered agent 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.



MICHAEL COOP / Registered Agent's Signature

H06000184474 3

**H06000184474 3**

**PAGE 2**

**FLORIDA NATIONAL BUILDERS STUCCO LLC**

**ARTICLE IV: MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V: MEMBERS (optional)**

Managing Member:

MICHAEL COOP  
4530 WELLINGTON LANE  
MIMS, FL 32754

Managing Member:

GLENN MORAN  
1119 LINDA AVENUE  
TITUSVILLE, FL 32780

Managing Member:

CATHY KERSHNER  
3630 LIONEL ROAD  
MIMS, FL 32754

---

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.)

MICHAEL COOP

**H06000184474 3**