# L06000091577

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP     ☐ WAIT     ☐ MAIL

_____
(Business Entity Name)

_____
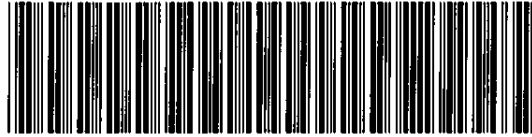(Document Number)

Certified Copies _____     Certificates of Status _____

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AL

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# COVER LETTER

**TO:**   Registration Section
Division of Corporations

**SUBJECT:** Hard Rock Drywall LLC
<span style="text-align:center">(Name of Limited Liability Company)</span>

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alfred R. Brumbley Jr.
<span>(Name of Person)</span>

Hard Rock Drywall LLC
<span>(Firm/Company)</span>

30 Oakmont Dr.
<span>(Address)</span>

Crawfordville Fl 32327
<span>(City/State and Zip Code)</span>

For further information concerning this matter, please call:

Alfred R. Brumbley Jr. at (850) 509-6041
<span>(Name of Person)</span>    <span>(Area Code & Daytime Telephone Number)</span>

Enclosed is a check for the following amount:

ρ  $125.00 Filing Fee     ρ  $130.00 Filing Fee &     ρ  $155.00 Filing Fee &     ρ  $160.00 Filing  Fee,
Certificate of Status          Certified Copy                Certificate of Status &
(additional copy is enclosed)      Certified Copy
(additional copy is enclosed)

**Mailing Address**                     **Street/Courier Address**
Registration Section                    Registration Section
Division of Corporations                Division of Corporations
P.O. Box 6327                           Clifton Building
Tallahassee, FL 32314                   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:

Hard Rock Drywall L.L.C

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC.,")

**ARTICLE II - Address:**
The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

30 Oakmont Dr
Crawfordville Fl
32327

**Mailing Address:**

30 Oakmont Dr
Crawfordville Fl
32327

**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:

Alfred R. Brumbley Jr.
Name

30 Oakmont Dr.
Florida street address (P.O. Box **NOT** acceptable)

Crawfordville FL 32327
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..*

Alfred R. Brumbley Jr.
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

MgrM

**Name and Address:**

Alfred R. Brumbley Jr.
30 Oakmont Dr.
Crawfordvill Fl 32327

(Use attachment if necessary)

*[FILED stamp: SECRETARY OF STATE TALLAHASSEE, FLORIDA 06 SEP 19 AM 10: 02]*

**ARTICLE V:** Effective date, if other than the date of filing: _____ . (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:**

Alfred R. Brumbley Jr.

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.)

Alfred R. Brumbley Jr.

Typed or printed name of signed

**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)