### 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.

(((H0700000058 3)))



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

:oT

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : HUBCO

Account Number: 104662003400

Phone

: (516)935-3940

Fax Number

: (516)935-3088

## DRIDA/FOREIGN LIMITED LIABILITY CO.

#### Lennox Masonry LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: Lennox Masonry LLC

ARTICLE II - Address

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

Principal Office Address:	Mailing Address:	
1500 Alamo Lane	1500 Alamo Lane	
Dunedin, FL 34698	Dunedia, FL 34698	
ARTICLE III - Registered The name and Florida street addre	Agent, Registered Office & Registered Agent's S as of the registered agent are:  Timothy Lennox  Name	Y OF STA
	(P.O. Box or Mail Drop Box NOT Acceptable)	55 57
	• •	

Taving been named as registered agent and to accept service of process for the above stated limited liability company it the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this apacity. 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.

Registered Agent's Signature - Timothy Lennox

# ARTICLE IV - Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGRM** Timothy Lennox-1500 Alamo Lane, Dunedin, FL 34698 (Use attachment if necessary) REQUIRED SIGNATURE: Signature of a member or 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.) Timothy Lennox Typed or printed name of signee