

LO7000025691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

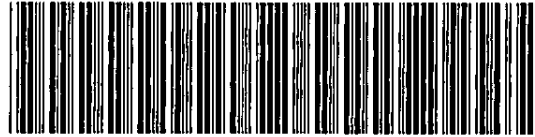
(Business Entity Name)

(Document Number)

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

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Office Use Only



400090573044

03/07/07--01026--025 \*\*130.00

**EFFECTIVE DATE**

3/6/07

FILED  
07 MAR - 7 AM 10:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR - 8 2007

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HELCO TECH 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:

DELFRED R BEYERS  
(Name of Person)

BADGER TAX & ACCOUNTING  
(Firm/Company)

101 FLAMINGO DR  
(Address)

APOLLO BEACH, FL 33572  
(City/State and Zip Code)

For further information concerning this matter, please call:

DELFRED R BEYERS at (813) 645-5634  
(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

RUSKIN, FL 33570 RUSKIN FL 33570

**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:

DELFRED R BEYERS  
Name  
101 FLAMINGO DR  
Florida street address (P.O. Box **NOT** acceptable)  
APOLLO BEACH FL 33572  
City, State, and Zip

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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.

Delfred R Beyers  
Registered Agent's Signature (REQUIRED)

**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:**

MGR

STARLA MOON  
2812 14th AVE SE  
RUSKIN FL 33570

MGRM

ROBERT HALMO  
2812 14th AVE SE  
RUSKIN, FL 33570

MGRM

LUWIN MOON  
2812 14th AVE SE  
RUSKIN FL 33570

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 3-6-07 (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:**

Delfred R Beyers  
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.)

DELFRED R BEYERS  
Typed or printed name of signer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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)