

L07000027210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

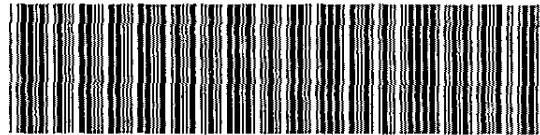
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800092017758

EFFECTIVE DATE  
03/07/07

03/12/07--01048--010 \*\*130.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR 12 PM 1:59

J. BRYAN MAR 13 2007

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PAUL HARVEY HOME ENHANCEMENT L.L.C.  
(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:

Paul Harvey

(Name of Person)

Paul Harvey Home Enhancement L.L.C.

(Firm/Company)

1105 Middle Dr.

(Address)

Fort Walton Beach, Florida 32547

(City/State and Zip Code)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAR 12 PM 2:00

For further information concerning this matter, please call:

Paul Harvey

(Name of Person)

at ( 850 ) 685-9412

(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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Paul Harvey Home Enhancement L.L.C.

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

### ARTICLE II - Address:

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

#### Principal Office Address:

1105 Middle Dr.  
Fort Walton Beach  
Florida, 32547

#### Mailing Address:

1105 Middle Dr.  
Fort Walton beach  
Florida, 32547

### 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:

Penny Powers

Name

1105 Middle Dr.

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

Fort Walton Beach FL 32547

City, State, and Zip

EFFECTIVE DATE  
03/07/07

*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..*

Penny Powers

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

**Name and Address:**

MGR

Paul Harvey

MGRM

Penny Powers

FILED STATE  
SECRETARY OF CORPORATIONS  
97 MAR 12 PM 2:00  
DIVISION OF CORPORATIONS

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 03-07-07 (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:**

Paul Harvey  
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.)

PAUL HARVEY  
Typed or printed name of signee

**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)