## L07000048146

(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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TALLAHASSEE, FLORID

## **COVER LETTER**

Division of C			
SUBJECT: Secon	d to None Remodeling	g and Construction LL	С
	(Name of Limite	d Liability Company)	
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
Sarah K. F			
	(	Name of Person)	
Second to	None Remodeling a	nd Construction LLC	
	(	(Firm/Company)	
212 Geor	ge Wallace Blvd.		
		(Address)	
Panama (	City Beach, Florida	32413	
	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Sarah K. Pask		at (850 ) 236-241	9
(Nam	e of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check f	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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:				
Second to None Remodeling and Constructi	on I.I.C			
Second to None Remodeling and Construction LLC  (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 is:				
Principal Office Address:	Mailing Address:			
212 George Wallace Blvd.	212 George Wallace Blvd.			
Panama City Beach, Florida 32413	Panama City Beach, Florida 32413			
<del></del>	·			
(The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)  The name and the Florida street address of the Sarah K. Pask		FILED  FILED  FILED  FILED  FILED  FILED		
		AM EE,		
212 George Wallace Blvd.  Florida street address (P.O. Box NOT acceptable)				
	· —	8: 03 STATE		
Panama City Beach	FL 32413	▶		
City, Sta	ate, and Zip			
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as r	in this certificate, I hereby accept the acity. I further agree to comply with e performance of my duties, and I a	he appointment as h the provisions of all m familiar with and		

(CONTINUED) Page 1 of 2

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Sarah K. Pask	212 George Wallace Blvd. Panama City Beach, Florida 32413
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the	date of filing: DATE OF FILE (OPTIONAL)
	specific and cannot be more than five business days prio
REQUIRED SIGNATURE:	
Signabuse of a member	r or an authorized representative of a member.
(In accordance with sec	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury
Sarah K. Pask	bed or printed name of signee 29

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)