

2070000117126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

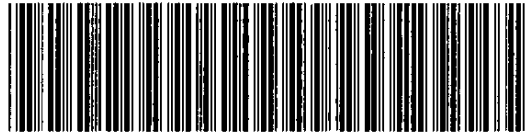
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DIVISION OF CORPORATIONS
07 NOV 20 PM 1:33

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: JOURNEY MAN MAINTENANCE, LLC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

~~☒ \$78.75~~
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: CARLITO G. FLORES
Name (Printed or typed)

809 BEVERLY PARKWAY
Address

PENSACOLA, FLORIDA 32505
City, State & Zip

850-435-6845
Daytime Telephone number

C. G. FLORES & RAY G. FLORES, CPA
Accounting & Tax Service
809 Beverly Pkwy
Pensacola, Florida 32505
Tele. (850) 435-6845

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF ORGANIZATION FOR JOURNEY MAN MAINTENANCE LLC

ARTICLE I. Name

The name of the Limited Liability Company is JOURNEY MAN MAINTENANCE, LLC.

ARTICLE II. Address

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

Principal Office Address:

1951 Bob Sikes Road
Defuniak Springs, Florida 32435

Mailing Address:

1951 Bob Sikes Road
Defuniak Springs, Florida 32435

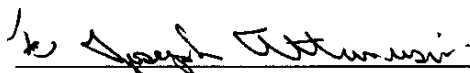
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DIVISION OF CORPORATIONS
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ARTICLE III. Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Joseph Attanasio
1951 Bob Sikes Road
Defuniak Springs, Florida 32435

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 property 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

ARTICLE IV. Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as follows:

Title:

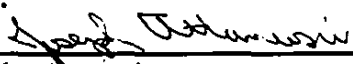
Name and Address:

Managing Member

Joseph Attanasio
1951 Bob Sikes Road
Defuniak Springs, Florida 32435

Rosalita Attanasio
1951 Bob Sikes Road
Defuniak Springs, Florida 32435

REQUIRED SIGNATURE:



Joseph Attanasio

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.)

Joseph Attanasio, Managing Member
Name of signee