

L08000045151

(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



100122701111

04/11/08--01030--014 **160.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY - 5 PM 4:12

J. BRYAN

MAY - 6 2008

EXAMINER

W08-18952
J. BRYAN APR 14 2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J-J HANDY MAN SERVICES, 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:

JACKIE LEE HALL
(Name of Person)

J-J HANDY MAN SERVICES, INC
(Firm/Company)

2517 COSMOS AVE.
(Address)

Middleburg Fla. 32068
(City/State and Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY -5 PM 4:12

For further information concerning this matter, please call:

JACK L. HALL at (904) 282-0996
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2008

JACK HALL
2517 COSMOS AVE
MIDDLEBURG, FL 32068

SUBJECT: J-L-J HANDYMAN SERVICES LLC
Ref. Number: W08000020821

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
08 MAY - 5 PM 4:12

We have received your document for J-L-J HANDYMAN SERVICES LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 708A00024919

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J-L-J [REDACTED] HANDY MAN SERVICES LLC."
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Same

Mailing Address:

JACK HALL
2517 COSMOS AVE
Middleburg Fla. 32068

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:

JACK L. HALL
Name
2517 COSMOS AVE
Florida street address (P.O. Box NOT acceptable)
Middleburg FL 32068
City, State, and Zip

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY -5 PM 4:12

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.

Jackie L. Hall
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

JACK L. HALL
2517 COSMOS AVE
MIDDLEBURG FLA. 32068

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY - 5 PM 4:12

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:

Jackie L. Hall
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.)

JACKIE L. HALL
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)