# L0900002816

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(C): (C): (T): (D)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
S. HAWKES.				
FEB 2.5 2009				
EXAMINER				

Office Use Only



400143761864

02/23/09--01033--012 \*\*125.00



S. HAWKES

MAR 9 2009

EXAMINER

W9-9093

# **COVER LETTER**

TO:

Registration Section

Division of Co	rporations	•			
SUBJECT: South	west Florida Cont	ractors LLC.			
(Name of Limited Liability Company)					
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
Joseph F.	DiBiasi				
		(Name of Person)			
		(Firm/Company)			
224 Baysh	nore Dr.				
		(Address)			
Cape Cora	al Florida 33904				
	(Ci	ty/State and Zip Code)			
For further information	concerning this matter, pleas	e call:			
Lorraine DiBiasi		at (239 \ 850-062	2		
(Name	of Person)	(Area Code & Daytime Tele	ephone Number)		
Enclosed is a check for	or the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 O Tallahassee, FL 32301			



### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2009

JOSEPH F DIBIASI 224 BAYSHORE DR CAPE CORAL, FL 33904

SUBJECT: SOUTHWEST FLORIDA CONTRACTORS LLC

Ref. Number: W09000009093

We have received your document for SOUTHWEST FLORIDA CONTRACTORS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 23, 2009. Please amend your document accordingly.

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) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 209A00006645

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# SOUTHWEST FLORIDA CONTRACTORS 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:	Mailing Address:	
224 BAYSHORD DR.	224 BAYSHORE DR.	
CAPE CORAL FL. 33904	CAPE CORAL FL. 33904	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address of  JOSEPH DIBIA	wn Registered Agent. You must designate an indoor	lividual or another  SECRUTAL LAHAS
	Name	
224 BAYSHOR	E DR.	
Florida s	treet address (P.O. Box NOT acceptable)	<del></del> —
CAPE CORAL	FL.33904	<b>29</b>
City	, State, and Zip	

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u>	Name and Address:	3
"MGR" = Manager	•	( *****
"MGRM" = Managing Member		M 11: 29
"MGRM"	CHRISTOPHER DUGAR	置る
	2200 NE 14PLACE	सुन ७
	CAPE CORAL 33909	
"MGRM"	RON DELLAROCCO	
	17501 CEMTERY RD	
	FT. MYERS FL	
"MGRM"	DONALD P. KING	
	2206 SW 28 TERR.	
	CAPE CORAL FL. 33904	
"MGRM"	JOSEPH F. DIBIASI	
	224 BAYSHORE DR.	
	CAPE CORAL FL. 33904	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 2-13-09-2-27-07. (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:** 

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 F. DIBIASI

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)