# L09000040787

•	
	(Requestor's Name)
•	
	(Address)
· . · .	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status

Special Instructions to Filing Officer:

L. SELLERS

APR 2 8 2009

**EXAMINER** 

Office Use Only



100152674781

04/27/09--01058--022 \*\*125.00

PILED

SECRETARY OF STATE

SECRETARY OF STATE

Ţ

# TRANSMITTAL LETTER

TO: Registration Se Division of Cor			
SUBJECT:	A & R Me	etal Roofing, LLC	
	(Name of Limite	d Liability Company)	
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.	
Please return all correspondent	ondence concerning this matte	er to the following:	
		lymond E. Lovett	
	( ;	Name of Person)	
		Metal Roofing, LLC	
	(	Firm/Company)	
	5210	Island Lake Drive	
	·	(Address)	
	Jackson	ville, Florida 32226	
	(City.	/State and Zip Code)	
For further information of	concerning this matter, please	call:	
Raymond E. Lovett		at (_904) 864-5229	
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check fo	r the following amount:		
<b>Z</b> \$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)
STREET ADDRESS:		MAILING A	
Registration Section Division of Corporations		Registration S Division of Co P.O. Box 6327	orporations
409 E. Gaines Street Tallahassee, Florida 32399		Tallahassee, F	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:  A & R Metal Roofing LLC					
Principal Office Address:		Mailing Address:			
Raymond E. Lovett		5210 Island Lake Dr Jacks	sonville FI 32226		
Andrew T Perez		139-1 Bennard Rd Jackson	ville, FL 32218		
	Raymond E. Lo Name	ovett			
***************************************	Name				
	5210 Island Lake Dr				
	Florida street address (P.O. Box NOT acceptable)				
	Jacksonville,	FL 32226			
	City, State, ar	ıd Zip			
Having been named as registe liability company at the pla registered agent and agree to a statutes relating to the proper accept the obligations of m	ce designated in th act in this capacity r and complete per	nis certificate, I hereby acce . I further agree to comply formance of my duties, and	ept the appointment as with the provisions of all I I am familiar with and		

(CONTINUED)

Page 1 of 2

O9 APR 27 AM 8: +8

## 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	Raymond E. LOvett
	5210 Island Lake Drive
	Jacksonville, Fl 32226
MGR	Andrew T. Perez
	139-1 Bennard Rd
	Jacksonville, FL 32218

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

Raymond E. Lovett

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)

J9 APR 27 AM 8: ÷8 SECRETARY OF STATE