

109 0000 48 525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

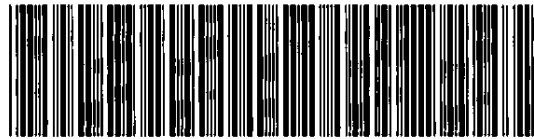
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200155960322

05/18/09--01034--016 **125.00

FILED
2009 MAY 18 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

MAY 19 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: S & R Tires, 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:

Cindy Randall

Name of Person

S & R Tires, LLC.

Firm/Company

P. O. Box 984

Address

San Antonio FL 33576-0984

City/State and Zip Code

scsrandall@msn.com

E-mail address: (to be used for future annual report notification)

2009 MAY 18 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Cindy Randall

Name of Person

at (352) 521-2136

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

S & R Tires, 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:

32643 SR 52

San Antonio FL 33576

Mailing Address:

P. O. Box 984

San Antonio FL 33576-0984

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:

Cynthia L. Randall

Name

31245 St. Joe Rd.

Florida street address (P.O. Box NOT acceptable)

Dade City FL 33525

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..

Cynthia L. Randall

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2009 MAY 18 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

