

1090000 81189

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

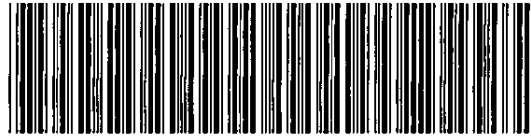
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100159839261

08/24/09--01003--013 **160.00

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2009 AUG 24 AM 11:31
NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
09 AUG 24 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

AUG 24 2009

EXAMINER

109-81189

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CALLAGHAN ROOFING & CONSTRUCTION L.L.C
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:

JASON CALLAGHAN
Name of Person

Firm/Company

PO Box 61
Address

Crawfordville FL 32326
City/State and Zip Code

Jasonjcallaghan@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LIAM CALLAGHAN at (850) 570-6089
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

09 AUG 24 AM 11:33
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CALLAGHAN ROOFING & CONSTRUCTION, 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:

29 Catawba Trail
Crawfordville FL 32327

Mailing Address:

PO Box 61
CRAWFORDVILLE, FL
32326

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:

JASON CALLAGHAN

Name

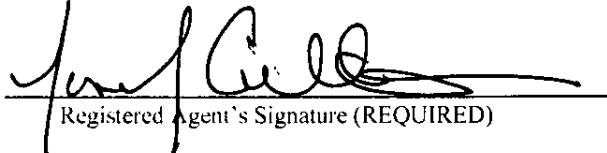
29 CATAWBA TR

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

CRAWFORDVILLE FL 32327

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)

FILED
09 AUG 24 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MGRM

JASON CALLAGHAN
29 CATAWBA TR
CRAWFORDVILLE, FL 32327

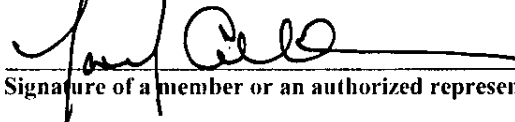
MGRM

LIAM CALLAGHAN
35 CATAWBA TR
CRAWFORDVILLE, FL 32327

(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:



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.)

Jason J Callaghan

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)

FILED
09 AUG 14 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA