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(Requestor's Name)	-
(Address)	-
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PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	-
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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Office Use Only



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DEPARTMENT OF STATE

WISTON OF CURNORATION

B. KOHR
JAN-8 2010
EXAMINER

DIVISION OF CORPORATION

10 JAN -6 AMII: 29



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 6, 2010

SUNSTATE RESEARCH

TALLAHASSEE, FL

SUBJECT: LOOSE SCREWS, LLC

Ref. Number: W10000000534

SE SCREWS, LLC and your check(s)

We have received your document for LOOSE SCREWS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$160.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6914.

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Buck Kohr Regulatory Specialist II

Letter Number: 610A00000384

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Sonstate Research Requester's Name	,
Address	•
Address Of	, e.
City/State/Zip Phone #	
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Office Use Only	A GENT
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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):	<b>₹</b>
1. Loose Screws LLC	
1. (Corporation Name) (Document #)	
2. (Corporation Name) (Document #)	
(Corporation Name) (Document *)	
2	
(Corporation Name) (Document #)	
4. (Corporation Name) (Document #)	
(Corporation Name) (Document #)	
Walk in Pick up time Certified Copy	
Mail out Will wait Photocopy Certificate of Status	
NEW FILINGS AMENDMENTS	
Profit Amendment Not for Profit Resignation of R.A., Officer/Director	
Limited Liability Change of Registered Agent	
Domestication Dissolution/Withdrawal	
Other Merger	
OTHER FILINGS REGISTRATION/QUALIFICATION	
Annual Report Foreign	
Fictitious Name  Limited Partnership  Reinstatement	
Trademark	
Other	
Examiner's Initials	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

The name of the Limited Liability Company is:

SCREW CONSTRUCTION, LLC
LOOSE XCREWSXLLCX

### **ARTICLE II - Address**

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

3855 St. Valentine Way Orlando, Florida 32811

## ARTICLE III - Registered Agent and Office and Registered Agent's Signature

The name and the Florida street address of the registered agent are:

CORPORATION COMPANY OF ORLANDO 300 South Orange Avenue Suite 1000 (MJG) Orlando, Florida 32801-5403

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, Florida Statutes.

CORPORATION COMPANY OF ORLANDO

(Registered Agent's Signature)

Michael J. Grindstaff, Vice President

Signature of a member or an authorized representative of a member.

Michael J. Grindstaff, Authorized Representative

(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.)