

UO 000039487

R. KRUEGER CONSTRUCTION CO.

141 STEVENS AVE SUITE 3

OLDSMAR, FL 34677

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

T. CLINE

APR 13 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 30, 2010

R. KREUGER  
141 STEVENS AVE, SUITE 3  
OLDSMAR, FL 34677

SUBJECT: R. KREUGER CONSTRUCTION CO  
Ref. Number: W10000015714

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

In order to file a LLC you must complete the application entirely.,

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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 010A00007799

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BKRK Lot 3

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:

Richard Krueger

Name of Person

BKRK Lot 3 LLC

Firm/Company

440 Roberts Rd Suite A

Address

Oldsmar, FL 34677

City/State and Zip Code

rick@rkruegerconstruction.com

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

For further information concerning this matter, please call:

Richard Krueger

Name of Person

at ( 813 ) 814-0778

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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TALLAHASSEE, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

BKRK Lot 3 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:

440 Roberts Rd Suite A  
Oldsmar, FL 34677

#### Mailing Address:

440 Roberts Rd Suite A  
Oldsmar, FL 34677

### 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:

Craig Krueger

Name

916 Toddsmill Rd

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

Tarpon Springs

FL 34689

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)

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**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

Richard Krueger

618 Fayette Dr S

Safety Harbor, 34695

MGRM

Stephanie Garner

440 Roberts Rd Suite E

Oldsmar, FL 34677

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 3/26/2010. (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.)

Richard Krueger

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)

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