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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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Effective Date 04/07/10

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SECRETARY OF STATE
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J. BRYAN

APR 1 3 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Roger Bakey's Repair Service, 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:

<u> Hoger Bakey</u>		
	Name of Person	
Roger Bakey's Repair Se	rvice, LLC.	SECRETARIA MARKATANA MARKA
	rum/Company	57
1629 Blue Heron Lane		
	Address	<u>'</u>
Fernandina, Florida 32034	1	LORIT
Cit	y/State and Zip Code	9,
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please	e call:	
Roger Bakey Name of Person	at (508) 843-19 Area Code & Daytime Tele	
Enclosed is a check for the following amount:		
□\$125.00 Filing Fee & Certificate of Status	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 COMPA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Roger Bakev's Repair Service, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

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

1629 Blue Heron Lane Fernandina, Florida 32034	1629 Blue Heron Lane Fernandina, Florida 32034
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registeries entity with an active Florida registration.) The name and the Florida street address of the Name	e registered agent are: Effective Date 04/07/10 Madelelne Baker
	ddress (P.O. Box <u>NOT</u> acceptable)

Mailing Address:

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.

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Mana The name and address of each Mana	naging Member(s): nger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Roger Bakev 1629 Blue Heron Lane Fernandina, Florida 32034
(Use attachment if necessary) RTICLE V: Effective date, if other than the fan effective date is listed, the date must be or 90 days after the date of filing.)	e date of filing: 7 2000 (OPTIONAL) De specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Roge 7 Signature of a member	n Baly A er or an authorized representative of a member.
	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

Roger Bakey
Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)