

U10000063/53

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

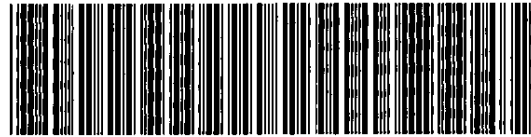
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600181850866

06/14/10--01010--010 **25.00

05/28/10--01031--009** 100.00

T. CLINE
JUN 14 2010
EXAMINER
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2010 JUN 11 PM 12:54

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 1, 2010

SOUTHEAST CAPITAL SERVICES LLC
127 ANTIGUA DR.
COCOA BEACH, FL 32931

SUBJECT: SOUTH EAST CAPITAL SERVICES LLC
Ref. Number: L06000120491

We have received your document for SOUTH EAST CAPITAL SERVICES LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The total amount due to reinstate is \$516.25.

You must insert the letters " MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

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: 810A00013565

\$125 new
Att 6 026
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JUN 11 PM 12:54

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From the Desk of...

John A. Tumelson
Southeast Capital Services, LLC
127 Antigua Drive
Cocoa Beach Florida 32931

June 10, 2010

Ms. Tammi Cline
Regulatory Specialist II
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Letter Reference: 810A0012565

Subject: New Filing for Southeast Capital Services, LLC

Dear Ms. Cline

Based on my follow up conversation with you from your June 1, letter (attached), please find the attached documents to file for a new LLC in the State of Florida.

Attached also you will find a check for \$25.00 (#1191) which can be combined with my previous check of \$100 (#1190), which will cover the filing amount.

Per our conversation, you will find our Articles of Organization.

Thank you for your assistance in this matter.

Sincerely,



John A. Tumelson

Phone: 321 406 0876
Email: jtumelson@gmail.com

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2010 JUN 11 PM 12:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southeast Capital Services, 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:

John A. Tumelson

(Name of Person)

Southeast Capital Services, LLC

(Firm/Company)

127 Antigua Drive

(Address)

Cocoa Beach, Florida, 32931

(City/State and Zip Code)

For further information concerning this matter, please call:

John tumelson

(Name of Person)

at (678) 778-4105

(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Southeast Capital Services, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

127 Antigua Drive, Cocoa Beach, FL, 32931

Mailing Address:

127 Antigua Drive, Cocoa Beach, FL, 32931

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:

John A. Tumelson

Name

127 Antigua Drive

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

Cocoa Beach, FL, 32931

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.

See attached

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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JUN 11 PM 12:54
CLERK 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:

MGR

John A. Tumelson

127 Antigua Drive

Cocoa Beach, FL, 32931

MGRM

Dale H. Tumelson

127 Antigua Drive

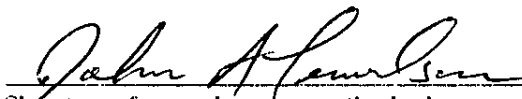
Cocoa Beach, FL, 32931

(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.)

John A. Tumelson

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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