## L1000066483

(Re	equestor's Name)	
(Ac	ldress)	,
(Ac	ddress) .	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800182339678

Effective Date

06/22/10

08/21/10--01063--011 \*\*160.00

FILED
10 JUN 21 PH 4: 20
SECRETARY OF STATE

J. BRYAN

JUN 2 2 2010

**EXAMINER** 

## **COVER LETTER**

' TO:

Registration Section Division of Corporations

SUBJECT: Florida	Restoration Contractors	s, LLC				
		ted Liability Co	mpany		<del></del>	
The enclosed Articles	of Organization and fee(s) are	submitted for f	iling.			
Please return all corres	pondence concerning this mat	ter to the follov	ving:			
Jerome Gibb	emeyer					
		Name of Person	1			
Florida Resto	oration Contractors, LLC					
<del> </del>		Firm/Company	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
1000 Quaysid	de Terrace Apt. 805					
		Address		-		
Miami, Florid		·			SEC SEC	7
		y/State and Zip C	Code		AHAZ	<u>.</u>
jerrtyg@yaho	E-mail address: (to be used:	for future annual	report notification		SSP	1
For further information	concerning this matter, please		report nourieatte	му	JUN 21 PH 4: 21	てここに
Jerome Gibberney	or	. 401	<sub>1</sub> 835-19	7 <u>0</u>	:20	
	of Person	_ at (_401 Area C		7 O Telephone Number	77	
Enclosed is a check f	or the following amount:					
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	S155.00 F Certified (additional)		) Certified C	of Status &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisi Clifto	t/Courier Addrates tration Section ion of Corporate Building Executive Cent	tions		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FI	LORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	ETASSEE PLED
Florida Restoration Contractors, LLC	For F.
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1000 Quayside Terrace Apt 805 Miami, Florida 33138	1000 Quayside Terrace Apt 805 Mlami, Florida 33138
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the interest and interest address of the interest address.	retered Agent. You must designate an individual or another  Effective Date 06/22/0
Jerome Gibbemeyer	
Name	
1000 Quayside Terrace A	Apt. 805 dress (P.O. Box NOT acceptable)
Miami City St	FL 33138 ate, and Zip
•	
Having been named as registered agent and to	accept service of process for the above stated limited

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..

(egistered Agent's Signature (REQUIRE)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member		平而 3
MGRM	Jerome Gibbemeyer	TAR TAR
	1000 Quayside Terrace Apt. 805	
	Miami, Florida 33138	
MGRM	Jose Sanchez	ORITA
	8720 South West 82nd Street	90
	Miami, Florida 33173	<del></del>
(Use attachment if necessary)		
LE V: Effective date, if other than the	ne date of filing: June 22, 2010	(OPTIONAL)

**REQUIRED SIGNATURE:** 

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

(th 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.)

Jerome Gibberneyer

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)