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06/21/10--01041--019 **125.00

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10 JUL 13 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WI-29793

J. BRYAN

JUL 14 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: A ~ AMERICAN OVERHEAD GARAGE DOORS 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:

SANDRA TORRENCE, EA

Name of Person

CONFIDENTIAL TAX SERVICE

Firm/Company

P O BOX 2280

Address

NEW SMYRNA BEACH, FL 32170

City/State and Zip Code

CONFATXSVC@AOL.COM

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

For further information concerning this matter, please call:

SANDRA TORRENCE, EA

Name of Person

at (**386**)

423-7771

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

FILED
10 JUL 13 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 22, 2010

received
6/25/10

SANDRA TORRENCE, EA
CONFIDENTIAL TAX SERVICE
PO BOX 2280
NEW SMYRNA BEACH, FL 32170

SUBJECT: A - AMERICAN OVERHEAD GARAGE DOORS LLC
Ref. Number: W10000029793

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10 JUL 13 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for A - AMERICAN OVERHEAD GARAGE DOORS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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

The document number of the name conflict is #L08000102191, AMERICAN OVERHEAD GARAGE DOORS LLC.

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) 245-6043.

Joey Bryan
Regulatory Specialist-II

Letter Number: 010A00015350

CONFIDENTIAL TAX SERVICE

SANDRA TORRENCE, EA

P. O. Box 2280

Office: 402 Cedar Avenue

New Smyrna Beach, FL 32170

Voice: (386) 423-7771

Toll Free: 1-866-423-7771

Fax: (386) 423-3744

E-mail: ConfTaxSvc@AOL.com

June 25, 2010

Mr. Joey Bryan
Regulatory Specialist II
Division of Corporations
P. O. Box 6327
Tallahassee, FL

FILED
10 JUL 13 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: ALL AMERICAN OVERHEAD GARAGE DOORS, LLC

Dear Mr. Bryan:

In coordination with our telephone conversation today, I am returning the Articles of Organization with the name changed as shown above. The sole shareholder of All American Overhead Garage Doors, Inc. which was dissolved effective 6/21/2010 (copy of dissolution letter enclosed) is the same person named as Managing Member for this LLC. The corporation will never be resurrected.

Please permit the use of this name for the new LLC.

Sincerely,



Sandra Torrence, EA

Encls.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALL AMERICAN OVERHEAD GARAGE DOORS 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:

Mailing Address:

623 GOODWIN AVE
NEW SMYRNA BEACH, FL 32169

SAME

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:

PETER F. MCGAULEY

Name

623 GOODWIN AVE

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

NEW SMYRNA BEACH, FL 32169

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..

Pete McGauley 6/18/10

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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:

MGRM

PETER F MCGAULEY

623 GOODWIN AVE

NEW SMYRNA BEACH, FL 32169

(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:

 6/18/10
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.)

PETER F MCGAULEY

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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA