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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

AUG 19 2010

EXAMINER

-ATTORNEY AT LAW-

cc: Ms. Virginia Wilcox (w/o enclosure)

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Superior Door Systems, 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:

Virginia Wilcox

Name of Person

Superior Door Systems, LLC

Firm/Company

1701 Mill Street

Address

Tallahassee, Florida 32310

City/State and Zip Code

vlc02c@gmail.com

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

For further information concerning this matter, please call:

Virginia Wilcox

Name of Person

at (850) 561.3643

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

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

**ARTICLES OF ORGANIZATION
OF
SUPERIOR DOOR SYSTEMS, LLC**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE I.
Name**

The name of the Limited Liability Company is Superior Door Systems, LLC.

**ARTICLE II.
Address**

The mailing address and the street address of the principal office of the limited liability company is:

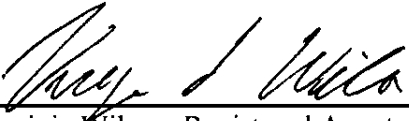
1701 Mill Street
Tallahassee, Florida 32310

**ARTICLE III.
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

Virginia Wilcox
1701 Mill Street
Tallahassee, Florida 32310

Having been named as registered agent and as the person 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, Florida Statutes.



Virginia Wilcox, Registered Agent

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TALLAHASSEE, FLORIDA

ARTICLE IV.
Management

The name and address of the initial Manager is:

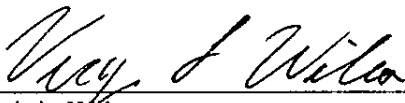
Virginia Wilcox
1701 Mill Street
Tallahassee, Florida 32310

ARTICLE V.
Effective Date

The Effective Date is the date of filing.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 16th day of August, 2010.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.



Virginia Wilcox

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