10000103885

	•	
(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bi	usiness Entity Nar	ne)
	ocument Number)	
(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
,		

Office Use Only



900186199909

10/04/10--01009--020 **130.00

2010 OCT -4 PHR: 50

TON

OCT - 5 2010

EXAMINER

COVER LETTER

TO:	Registration Division of C			
SUBJI	ECT: SURF	ACE WORKS OF FL	ORIDA	
		Name of Limit	ed Liability Company	
The en	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this mat	ter to the following:	
	CARL RAN	IGO		
			Name of Person	
	SURFACE	WORKSOF FEORID	A SURFACE WORKS	OF FLORIDA
•			r inn/Company	
	3033 DRIF	TWOOD WAY #3407		
			Address	······································
	NAPLES F		/Otata1 7:- Ca-l-	
	0.000.000.000		y/State and Zip Code	
	CARLRANG	GO@HOTMAIL.COM	for future annual report notification)	
- 4			•	SS + F
For tur	ther information	concerning this matter, please	e call:	rie p
CAR	L RANGO		AE1 100G	hone Number IDE
OAN		of Person	_at (239 <u>) 451-1096</u> Area Code & Daytime Telep	hone Number
				Mone Number & O
Enclos	ed is a check f	or the following amount:		
□\$ 125.	00 Filing Fee	21\$130.00 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 Ci	; rcle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Cor	mpany is:	
SURFACE WORKS OF FLO	ORIDA LLC.	
(Must end with the words "Li	mited 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:	
JED RANGO	3033 DRIFTWOOD WAY#3407 NAPLES FL 34109	
CARL RANGO	3033 DRIFTWOOD WAY#3407 NAPLES FL 34109	
JOE NAPOLITANO	3033 DRIFTWOOD WAY#3407 NAPLES FL 34109	
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.	The same	
The name and the Florida street addres		
CARLRANGO	Name P T S	
•	Name	

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

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

FL 34109

Registered Agent's Signature (REQUIRED)

3033 DRIFTWOOD WAY#3407

NAPLES

(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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR **CARL RANGO** 3033 DRIFTWOOD WAY#3407 **MGRM JED RANGO** 3033 DRIFTWOOD WAY#3407 JOE NAPOLITANO MGRM 3033 DRIFTWOODWAY#3407 (Use attachment if necessary)

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

ARTICLE V: Effective date, if other than the date of filing:

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

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(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.)

CARL RANGO

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)