

L10000117297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**L. SELLERS**

NOV 10 2010

**EXAMINER**

*[Signature]*

Office Use Only



600186826526

10/25/10--01016--024 \*\*125.00

SECRETARY OF STATE  
TAMARA C. GRIFFIN

10 NOV -9 PM 3:52

**FILED**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ed The Welder  
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:

Edward M. Gionest, Jr.  
Name of Person

Ed The Welder  
Firm/Company

305 Pine Woods Road  
Address

Ormond Beach, FL 32174  
City/State and Zip Code

Laugilhe@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ed Gionest at ( 386 ) 566-3170  
Name of Person 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 26, 2010

EDWARD M. GIONEST JR.  
305 PINE WOODS ROAD  
ORMOND BEACH, FL 32174

SUBJECT: ED THE WELDER, LLC.  
Ref. Number: W10000050317

We have received your document for ED THE WELDER, 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.**

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) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 810A00025308

Attn: Leslie Sellers

November 10, 2010

Leslie Sellers  
Fl. Depart. Of State  
Division Of Corps.  
Corporate Records  
P.O. Box 6327  
Tallahassee, Fl 32314

Dear Ms. Sellers,

In response to Letter Number: 810A00025308

Ref. Number: W10000050317 Subject: Ed The Welder, LLC.

Ed The Welder, Inc. has no intention of reinstating in the future. Please process

Articles Of Organization For Florida Limited Liability Company as

Ed The Welder, LLC.

Please call (386) 566 - 3170 for any questions or concerns.

Thank you,



Ed Gionest

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Ed The Welder, 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:

Ed Gionest  
305 Pine Woods Road  
Ormond Beach, FL  
32117

Ed Gionest  
305 Pine Woods Road  
Ormond Beach, FL  
32117

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:

Joseph A. HOGUE DICE  
Name

1515 RIDGEWOOD AVE STE A  
Florida street address (P.O. Box NOT acceptable)

HOLLY HW FL 32117  
City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company of the above described business, I, the undersigned, do hereby agree to act as the 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.

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

"6.100"

FILED  
10 NOV -9 PM 3:52  
SECRETARY 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

Ed Gionest  
305 Pine Woods Road  
Ormond Beach, FL 32117

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Eddie Gionest  
Typed or printed name of signer

**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)**