

# L11000016533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

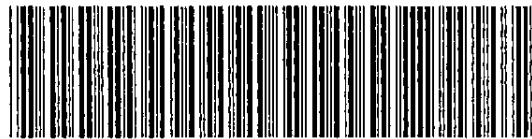
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER

FEB 08 2011

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HANDY MAN ALLAN FOR HIRE 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:

ALLAN KORSMO

Name of Person

Firm/Company

1370 NW BRITT RD #13

Address

STUART FL 34994

City/State and Zip Code

allan.korsmo@bellsouth.net

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

For further information concerning this matter, please call:

ALLAN KORSMO

Name of Person

at ( 772 ) 486-8666

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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

HANDY MAN ALLAN FOR HIRE 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:**

ALLAN KOASMO  
1370 NW BRIT RD #13  
STUART FL 34994

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:

ALLAN KOASMO  
Name  
1370 NW BRIT RD #13  
Florida street address (P.O. Box **NOT** acceptable)  
STUART FL 34994  
City, State, and Zip

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*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.*

Allan Koasmo  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

4 OF 4

**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:**MGRMALLAN KORSMO  
1320 NW BRIT RD #13  
STUART FL 34994MGRMLOIS KORSMO  
1320 NW BRIT RD #13  
STUART FL 34994MGRMALAN MORLAN  
1320 NW BRIT #4  
STUART FL 34994

(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.)

ALLAN KORSMO  
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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2 OF 4

**ALLAN KORSMO**  
**1370 NW BRITT RD. LOT 13**  
**STUART, FL 34994**  
**(772) 692-2934**

February 7, 2011

Florida Dept. of State  
Division of Corporations  
Att. Jeraline Saulsberry

The principles are the same in both corporations.

What I am trying to do is change from a regular corporation to a LLC corporation.

The name will be the same. As the accompanying paperwork shows I have dissolved: HANDY MAN ALLAN FOR HIRE, INC and am forming: HANDY MAN ALLAN FOR HIRE LLC.

I have no intention of reactivating "HANDY MAN ALLAN FOR HIRE, INC.

Sincerely,

  
Allan Korsmo

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TALLAHASSEE, FLORIDA