## L11000023487

| (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: |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |

Office Use Only



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Effective Date 02/22///

02/23/11--01013--010 \*\*125.00

FILED
11 FEB 23 AN 10: 43
SECRETARY OF STATE SECRETARY OF STATE

J. BRYAN

FEB 24 2011

**EXAMINER** 

## **COVER LETTER**

| TO: Registration Se<br>Division of Co |   |   |  |                  |
|---------------------------------------|---|---|--|------------------|
| SUBJECT:                              | Brannan + (Name of Limited  | umbing, Co. d Liability Company)  | +-(  |                  |
| The enclosed Articles o               | f Organization and fee(s) are su  | bmitted for filing.   |  |                  |
| Please return all corresp             | ondence concerning this matter  | to the following:   |  |                  |
|                                       | Leon Bank   | ian   |  |                  |
|                                       | (1  | Name of Person)   | ****   | <del></del>      |
| B                                     | rannan Pumb   | ing Co.   |  |                  |
|                                       | _   |   |  |                  |
| 861                                   | 38 Brannan  | Way   | =  | <del></del>      |
|                                       |   | (Address)   | VLL  | <del></del>      |
| Vu                                    | lee, 71. 320<br>(City/  | 97 -  | AHA<br>AHA   | EB 23            |
| <del></del>                           | (City/  | State and Zip Code)   | , SSE  | T G              |
| For further information               | concerning this matter, please c  | all:  | OF STATE   | EB 23 AM ID: 4.3 |
| Leon                                  | Brannan   | at ( <u>904</u> ) <u>225-5</u><br>(Area Code & Daytime Te   | 419  | ω.               |
| (Name                                 | of Person)  | (Area Code & Daytime Te   | lephone Number)  |                  |
| Enclosed is a check for               | or 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,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |                  |
|                                       | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street/Courier Address<br>Registration Section<br>Division of Corporation<br>Clifton Building<br>2661 Executive Center (<br>Tallahassee, FL 32301 | s  |                  |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1

| ARTICLE I - Name: The name of the Limited Liability Company is:   |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| Brannan Plumbing Co, LIC  (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")   |  |  |  |  |  |  |  |  |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:   |  |  |  |  |  |  |  |  |
| Principal Office Address: Mailing Address:  |  |  |  |  |  |  |  |  |
| 86137 Brannan Way  Yulee, Florida  Szog7  Szog7  Szog7  |  |  |  |  |  |  |  |  |
| 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.)  Effective Date 02/22//  |  |  |  |  |  |  |  |  |
| The name and the Florida street address of the registered agent are:  |  |  |  |  |  |  |  |  |
| Leon Brannan Name  Leon Brannan Name  Land Brannan |  |  |  |  |  |  |  |  |
| 86138 Brannan Way Florida street address (P.O. Box NOT acceptable)  |  |  |  |  |  |  |  |  |
| Vulee FL 32097  |  |  |  |  |  |  |  |  |

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..

Registered Agent's Signature (REQUIRED)

City, State, and Zip

(CONTINUED)

| Д.     | ARTICLE IV- Manager(s) or Mana<br>The name and address of each Manager  | aging Member(s):<br>er or Managing Member is as follows:   |                         |          |
|--------|---|--|-------------------------|----------|
| •      | <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member  | Name and Address:  |                         |          |
|        | Vice President  | Loon C. Brannan<br>86138 Brannan Way<br>Ywee, Fl. 32097  | ,                       |          |
|        | President   | Linda D. Brannan<br>86138 Brannan Way<br>Julee, FL 32093   |                         |          |
|        | · · · · · · · · · · · · · · · · · · ·   |  | SECRETA TALLAHA         |          |
|        |   |  |                         |          |
|        | (Use attachment if necessary)   |  | ATE                     | <b>S</b> |
| (If an | CLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.) | date of filing: $\frac{2/22/11}{25}$ the specific and cannot be more than  | . (OPTION<br>five busin | -        |
|        | REQUIRED SIGNATURE:   |  |                         |          |
|        | Low C B   | r or an authorized representative of a member  | usuw                    |          |
|        | (In accordance with sec<br>of this document consti  | ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury perein are true.) | ý                       |          |

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)

Typed or printed name of signee