

L11000052500

(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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04/19/11--01016--013 **122.50

05/04/11--01005--016 **7.50

FILED
2011 MAY -8 AM 11:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
May 4 2011
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 20, 2011

JOHN GRIMES / G & G HOME SERVICES
2069 FAWN RIDGE CT.
THE VILLAGES, FL 32162

SUBJECT: G & G HOME SERVICES CO.
Ref. Number: W11000022184

We have received your document for G & G HOME SERVICES CO. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please send your paperwork with a document number. I can't tell which one you are trying to convert. Your names are not on any of these companies. The LLC by this name is already inactive because of a conversion. There is also a corporation by this name that is inactive. Please put the officer titles by the names.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 011A00009598

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: G & G Home Work Services

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:

John Grimes

Name of Person

G & G Home Work Services

Firm/Company

2069 Fawnridge Court

Address

The Villages, Florida 32162

City/State and Zip Code

g_ghandyworkservices@yahoo.com

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

For further information concerning this matter, please call:

John Grimes

Name of Person

at (**352**)

350-6778

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

G & G Home Work Services L.L.C.

(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:

2069 Fawnridge Court
The Villages, Florida 32162

Mailing Address:

2069 Fawnridge Court
The Villages, Florida 32162

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:

John Grimes

Name

2069 Fawnridge Court

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

The Villages, FL 32162

FL

City, State, and Zip

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TALLAHASSEE, FLORIDA

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.

John Grimes

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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:

MGRM

John Grimes

2069 Fawnridge Court

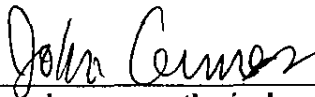
The Villages, Florida 32162

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: April 27 2011 (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.)

John Grimes

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)