

L11000059889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

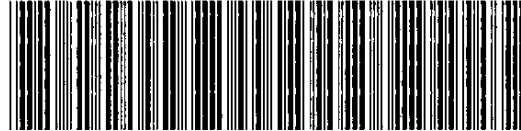
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/10/11--01013--024 **130.00

EFFECTIVE DATE
5/4/11

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY 10 PM 2 36

N. Culligan MAY 20 2011

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CONSUMER RELOCATION SERVICES 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:

GERARD A TROINO

Name of Person

CONSUMER RELOCATION SERVICES LLC

Firm/Company

67 LONDON DRIVE

Address

PALM COAST, FL 32137

City/State and Zip Code

GTROINO@GMAIL.COM

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

For further information concerning this matter, please call:

GERARD A TROINO

Name of Person

at (**904**) **377-3114**

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

May 11, 2011

GERARD TROINO
67 LONDON DRIVE
PALM COAST, FL 32137

SUBJECT: CONSUMER RELOCATIONS SERVICES LLC
Ref. Number: W11000026263

We have received your document for CONSUMER RELOCATIONS SERVICES LLC and your check(s) totaling \$130.00. 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.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 211A00011736

Gerard Troino
67 London Drive
Palm Coast, FL 32137

May 12, 2011

Florida Dept of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

Re P Document # 94000018453

This letter is being sent to make a statement that there is no intention of reinstating this corporation. This is effective immediately. therefore the name should be relased to be used to another entity.



Gerard Troino



5/18/2011



MARLENE TA
NOTARY PUBLIC
STATE OF FLORIDA
Comm# EE041121
Expires 11/9/2014

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CONSUMER RELOCATIONS SERVICES 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:

67 LONDON DRIVE
PALM COAST, FL 32137

Mailing Address:

67 LONDON DRIVE
PALM COAST, FL 32137

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:

GERARD A TROINO

Name

67 LONDON DRIVE


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

PALM COAST FL 32137

City, State, and Zip

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY 10 PM 2:36

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)

(CONTINUED)

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

GERARD A TROINO
67 LONDON DRIVE
PALM COAST, FL 32137

MGRM

RYAN DRAKE TROINO
3500 LONE WOLF TR
ST AUGUSTINE, FL 32084

MGRM

ROBERT W MATTOCKS
147 FREDERICK FARM ROAD
BUNNELL, FL 32110

MGRM


JOANNE B WALKUP
6813 PORCHER AVE # 20
MYRTLE BEACH, SC 29572

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 05/06/2011. (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.)

GERARD A TROINO

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)

FILED
11 MAY 10 PM 2:34
SECRETARY OF STATE
DIVISION OF CORPORATIONS