

L 110000 69781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

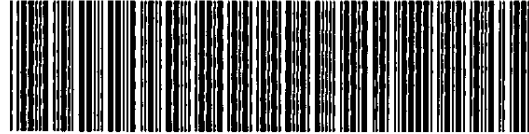
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B. KOHR

JUN 15 2011

EXAMINER



200207985572

06/13/11--01028--006 \*\*160.00

EFFECTIVE DATE 6/10/2011

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JUN 13 AM 11:16

B. KOHR

JUN 15 2011

EXAMINER

COVER LETTER

EFFECTIVE DATE 6/16/2011

TO: Registration Section  
Division of Corporations

SUBJECT: MCKINSTRY'S FINE WOODWORKING 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:

JAMES M MCKINSTRY  
(Name of Person)

MCKINSTRY'S FINE WOODWORKING LLC.  
(Firm/Company)

919 HAGLE PARK RD.  
(Address)

BRADENTON FL 34212  
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES M MCKINSTRY at (941) 746-0169  
(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

FILED STATE  
SECRETARY OF CORPORATIONS  
11 JUN 13 AM 11:16

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

EFFECTIVE DATE 6/10/2011

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JUN 13 AM 11:16

ARTICLE I - Name:

The name of the Limited Liability Company is:

MCKINSTRY'S FINE WOODWORKING "LLC."  
(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:

919 HAGLE PARK RD  
BRADENTON FL 34212

919 HAGLE PARK RD.  
BRADENTON FL 34212

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:

JAMES M MCKINSTRY  
Name

919 HAGLE PARK RD  
Florida street address (P.O. Box NOT acceptable)  
BRADENTON FL 34212  
City, State, and Zip

*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..*

James M McKinstry  
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

"MGR"

**Name and Address:**

JAMES M MCKINSTRY  
919 HAGLE PARK RD  
BRADENTON FL 34212

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 6/10/11 (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:**

James M McKinstry  
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.)

JAMES M MCKINSTRY  
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)