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SECRETARY OF STAFE
AND ANASSEE FOORIDA

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JUL - 5 2011

EXAMINER

COVER LETTER

	istration Section ision of Corporations	
SUBJECT:	GE Services LLC Name of Limited Liability Company	
The enclosed	l Articles of Organization and fee(s) are submitted for filing.	
Please return	all correspondence concerning this matter to the following:	
	Gene Erjavec Name of Person	
(Gene Erjavee Handyman Services	
 -	850 Palm St., C-19	
	Marco Island, FL 34145 City/State and Zip Code	
	Shermil address: (to be used for future annual report notification)	
For further in		iral 27 E
Ge	Name of Person Area Code & Daytime Telephone Number	
Enclosed is a	a check for the following amount:	
\$125.00 Filing	rig Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed)	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:
GE 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: Mailing Address:
850 Palm St.C-19 850 Palm St, C-19
Marco Island, FL 34145 Marco Island, FL 34145
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: Craig Couture Name
950 N. Collier BLVA. STE-208 Florida street address (P.O. Box NOT acceptable)
Marco Iscaul, FL 34145 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, ES
(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	Name and Address:
"MGRM" = Managing Member MGRM" = Managing Member	Gene Erjavec 850 Palmyst C-19 Marco Island, FL 34145
	
(Use attachment if necessary)	
CLE V: Effective date, if other than the effective date is listed, the date must 00 days after the date of filing.)	he date of filing: (OPTIONAL) be specific and cannot be more than five business days price
CLE V: Effective date, if other than the effective date is listed, the date must 00 days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business days price
CLE V: Effective date, if other than the effective date is listed, the date must to days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with section 6 constitutes an affirmation und I am aware that any false info constitutes a third degree felo	be specific and cannot be more than five business days prior to the penalties of perjury that the facts stated herein are frite. Formation submitted in a document to the Department of state only as provided for in s.817.155, F.S.) Typed or printed name of signee
CLE V: Effective date, if other than the effective date is listed, the date must to days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with section 6 constitutes an affirmation und I am aware that any false info constitutes a third degree felo	be specific and cannot be more than five business days prior to the prior of an authorized representative of a member. 508.408(3), Florida Statutes, the execution of this document, der the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)