

# L 11000077631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

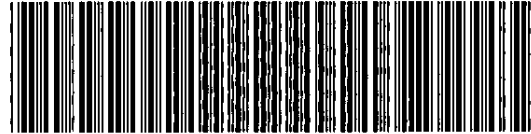
(Business Entity Name)

(Document Number)

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

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600209101906

EFFECTIVE DATE  
6/27/2011

07/01/11--01010--006 \*\*130.00

FILED

11 JUL - 1 AM 5:37

CLERK OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER

JUL 6 2011



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 5, 2011

JOHN M COSTANZA  
8538 BENCH DR., UNIT 1  
PORT RICHEY, FL 34668

SUBJECT: COSTANZA CONSTRUCTION LLC  
Ref. Number: W11000035574

We have received your document for COSTANZA CONSTRUCTION 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 existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is P09000066206 "COSTANZA CONSTRUCTION INC.".

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

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) 245-6870.

Karen A Saly  
Regulatory Specialist II

Letter Number: 311A00015976

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Costanza Construction**

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 M Costanza**

Name of Person

**Costanza Construction**

Firm/Company

**8538 Bench Dr Unit 1**

Address

**Port Richey, FL 34668**

City/State and Zip Code

**johnncostanza@yahoo.com**

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

For further information concerning this matter, please call:

**John Costanza**

Name of Person

at ( **727** ) **244-2057**

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:

Construction BY COSTANZA LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

EFFECTIVE DATE  
6/27/2011

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

8538 Bench Dr Unit 1

Port Richey, FL 34668

### Mailing Address:

8538 Bench Dr Unit 1

Port Richey, FL 34668

## 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 M Costanza

Name

8538 Bench Dr Unit 1

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

Port Richey, FL 34668

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..*

  
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:**

MGR

John M Costanza

2700 Bayshore Blvd #5103

Dunedin, FL 34698

MGRM

Christopher J Costanza

3323 Covered Bridge Dr East

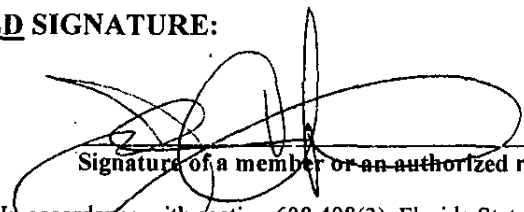
Dunedin, FL 34698

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: June 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 M Costanza

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)