

# L11000106788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Office Use Only



300211706313

09/06/11--01018--020 \*\*130.00

EFFECTIVE DATE

9/13/11

FILED  
11 SEP 19 AM 10:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 19 2011

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Vision Building & Construction 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:

Ronald A Marshall

Name of Person

Vision Building & Construction Services, LLC.

Firm/Company

5005 Claymore Dr Unit 201

Address

Tampa, Florida 33610

City/State and Zip Code

licensed2build4u@yahoo.com

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

For further information concerning this matter, please call:

Ronald A Marshall

Name of Person

at ( 813 ) 321-7344

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

September 7, 2011

RONALD A. MARSHALL  
5005 CLAYMORE DRIVE UNIT 201  
TAMPA, FL 33610

SUBJECT: VISION BUILDING & CONSTRUCTION SERVICES, LLC  
Ref. Number: W11000046137

We have received your document for VISION BUILDING & CONSTRUCTION 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):

You would have to resubmit the form to have that effective date. Can only go 90 days after the date of filing.

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: 711A00020708

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**Vision Building & Construction 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:**

5005 Claymore Dr. Unit 201  
Tampa, Florida 33610

**Mailing Address:**

5005 Claymore Dr. Unit 201  
Tampa, Florida 33610

**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:

Ronald A Marshall

Name

5005 Claymore Dr. Unit 201

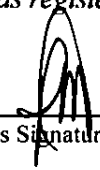
Florida street address (P.O. Box **NOT** acceptable)

Tampa

FL 33610

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..*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK 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:**

"MGR"

Tiana M. Marshall  
5005 Claymore Dr. Unit 201  
Tampa, Florida 33610

"MGRM"

Ronald A. Marshall  
5005 Claymore Dr. Unit 201  
Tampa, Florida 33610

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: September 13, 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.)

**Ronald A. Marshall**

\_\_\_\_\_  
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)**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA