# L11000136802

(Requestor's Name)  (Address)  (Address)	400214359344
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	12/05/1101035009 **16
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	EFFECTIVE DATE 1/1/2017

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**EXAMINER** 

\*\*160.00

# **COVER LETTER**

EFFECTIVE DATE 1 2012

TO: Registration Section
Division of Corporations

SUBJECT: French's Pump Service, 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:

Inomas A. French	
	Name of Person
French's Pump Service, L	LC.
	Firm/Company
5801 Spruce Drive	
·	Address
Fort Pierce, Florida 34982	
Ci	ity/State and Zip Code
rfps_inc@hotmail.com	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, pleas	se call:
Thomas A. French	at (772 ) 370-3550
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

EFFECTIVE DATE 1 1 2012

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPA

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# French's Pump Service, 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:
5801 Spruce Drive	PO BOX 12873
Fort Pierce, Florida 34982	Fort Pierce, Florida 34979
	<del></del>

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:

Daria M Sandro

	Name
2 Harbour Is	le Drive E. #103
Florida	street address (P.O. Box NOT acceptable)
Fort Pierce	<sub>FL</sub> 34949
· · · · · · · · · · · · · · · · · · ·	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)

Page 1 of 2

### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Memb	per
MGR	Thomas A. French
	5801 Spruce Drive
•	Fort Pierce, Florida 34982
·	
(Use attachment if necessary)	
CLE Ve Effective data if others	than the date of filing: January 1, 2012 (OPTIONAL)
	must be specific and cannot be more than five business days prior
O days after the date of filing.)	
,	
REQUIRED SIGNATURE:	
Mom	a a Fund
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.)

Thomas A. French

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)