

L12000065284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500235038115

05/14/12--01013--025 **125.00

FILED

12 MAY 14 AM 11:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
MAY 15 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Robert Hayes Handyman 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:

Robert Andrew Hayes

Name of Person

Robert Hayes Handyman Service

Firm/Company

1424 Wildrose Lane

Address

Holly Hill, Florida 32117

City/State and Zip Code

anderw27@hotmail.com

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

For further information concerning this matter, please call:

Robert Hayes

at

386

265-8427

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Robert Hayes Handyman 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:

1424 Wildrose Lane

Holly Hill, FL 32117

Mailing Address:

1424 Wildrose Lane

Holly Hill, FL 32117

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:

Robert Hayes

Name

1424 Wildrose Lane

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

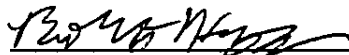
Holly Hill

FL 32117

City, State, and Zip

FILED
12 MAY 14 AM 11:25
SECRETARY OF STATE
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:

FILED
12 MAY 14 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

mgr

Robert Hayes

1424 Wildrose Lane

Holly Hill, FL 32117

mgrm

William Bracewell

1713 Clyde Morris Blvd Apt 202

Daytona Beach, FL 32114

mgrm

Jason Katzenbach

843 Madison Ave

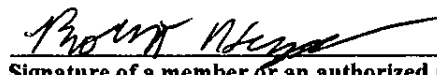
Daytona Beach, FL 32114

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

Robert Hayes

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)