

L12000/32727

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Effective Date

10/17/12--01005--019 \*\*130.00

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2012 OCT 17 AM 11:35  
TALLAHASSEE, FLORIDA  
CLERK OF SUPERIOR COURT

J. BRYAN  
OCT 18 2012  
EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CONTRACTOR'S CONSTRUCTION SERVICE L.L.C.  
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:

RICKIE TORRES  
Name of Person  
CONTRACTORS CONSTRUCTION SERVICE L.L.C.  
Firm/Company  
3407 40<sup>th</sup> ST S.W., LE  
Address  
LEHIGH ACRES FL 33976  
City/State and Zip Code  
CONTRACTORS 239 AT 6MAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICK TORRES at ( 239 ) 470-7508  
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

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TALLAHASSEE, FL  
SECRETARY OF STATE

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

CONTRACTOR'S CONSTRUCTION SERVICE. L.L.C.

(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:

3407 40th ST S.W.  
LEHIGH ACRES FL.

#### Mailing Address:

3407 40th ST S.W.  
LEHIGH ACRES FL.

### 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.)

Effective Date 11/01/12

The name and the Florida street address of the registered agent are:

NANCY GUDINO  
Name

1040 WARDEN LANE  
Florida street address (P.O. Box **NOT** acceptable)

IMMOKALEE FL 34142  
City, State, and Zip

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*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..*

Nancy Gudino  
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:**

MGRM

Rick TORRES  
3407 40th ST S.W  
LEHIGH ACRES FL 33976

MGRM

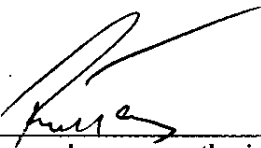
ESMERALDA TORRES  
3407 40th ~~ST~~ S.W  
LEHIGH ACRES FL 33976

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 11-1-12. (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.)

RICKIE TORRES  
\_\_\_\_\_  
Typed or printed name of signee

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2012 OCT 17 AM 11:35  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**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)