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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

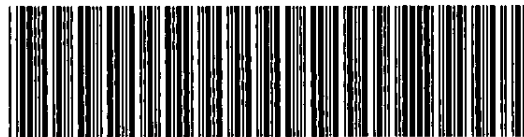
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JAN 30 2013

B. KOHR



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10/29/12--01006--010 **150.00

EFFECTIVE DATE

1/21/2013

FILED
13 JAN 28 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2012

MICHAEL P. ROBBIRDS
706 CORONDELAY DRIVE
PENSACOLA, FL 32506

SUBJECT: MIKE ROBBIRDS STUCCO, LLC
Ref. Number: W12000055465

EFFECTIVE DATE 1/21/2013

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TALLAHASSEE, FLORIDA

We have received your document for MIKE ROBBIRDS STUCCO, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Before the conversion can be filed, MIKE ROBBIRDS STUCCO, INC. will have to file a reinstatement. The reinstatement can be filed with a credit card on our www.sunbiz.org website. Or you may complete and sign the enclosed reinstatement form and mail it back with the conversion documents.

The total amount required to reinstate MIKE ROBBIRDS STUCCO, INC. is \$900. After Jan. 1, 2013, the amount will be \$1,050.00.

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) 245-6051.

Buck Kohr
Regulatory Specialist II

Letter Number: 612A00026582

(850) 245-6051.

COVER LETTER

EFFECTIVE DATE 1/21/2013

TO: **Registration Section
Division of Corporations**

SUBJECT: **Mike Robbirds Stucco, 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:

Michael P. Robbirds

Name of Person

Firm/Company

706 Corondelay Drive

Address

Pensacola, FL 32506

City/State and Zip Code

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

For further information concerning this matter, please call:

Michael P. Robbirds

Name of Person

at (**850**) **982-8860**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mike Robbirds Stucco, 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:

706 Corondelay Drive
Pensacola, FL 32506

Mailing Address:

706 Corondelay Drive
Pensacola, FL 32506

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:

Michael P. Robbirds

Name

706 Corondelay Drive

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

Pensacola

FL

32506

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.

Michael Robbirds

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

Michael P. Robbirds

706 Corondelay Drive

Pensacola, FL 32506

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1/1/2013 (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:

Michael Robbirds

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.)

Michael P. Robbirds

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)