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SECRETARY OF STATE
TALLAHASSEE FLORIDA

C. LEWIS

MAR 18 2013

EXAMINER

COVER LETTER

SUBJECT: ROY MOSES PAINTING LLC
Name of Limited Liability Company

ROY MOSES
Name of Person
ROY MOSES PAINTING LLC
Firm/Company
3031 LUTHER NAIL RD
Address
TALLAHASSEE FL 32310
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

_____ at (_____) _____
Name of Person Area Code & Daytime Telephone Number

☐ \$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)

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:

ROY MOSES PAINTING 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:

3031 LUTHER HALL RD
Tallahassee FL 32310

Mailing Address:

3031 LUTHER HALL RD
Tallahassee FL 32310

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:

ROY MOSES
Name
3031 LUTHER HALL
Florida street address (P.O. Box NOT acceptable)
TALL FL 32310
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..

ROY MOSES
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:

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**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

ROY MOSES
3031 LUTHER HALL RD
TALL FL 32310

(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:

ROY MOSES
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.)

ROY MOSES
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)**