## L13000042018

(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	-			
Special Instructions to	Filing Officer:			
	•			

Office Use Only



700245698277

03/19/13--01031--020 \*\*130.00

2013 HAR 19 AM 8: 32

J. SAULSBERRY EXAMINER MAR 20 2013

## **COVER LETTER**

	gistration Section vision of Corporations	
SUBJEC	: Gullotti Home WAtch, LLC	
5010150	Name of Limited Liability Company	
The enclo	ed Articles of Organization and fee(s) are submitted for filing.	32
Please re	n all correspondence concerning this matter to the following:	7013 MAR 19 AM 8: 3
	Stephen P. Gullotti SZ	ا م
_	Name of Person	H
	GULLOTT, HOME WATCH, LLC	ယ
	Firm/Company ST	-70
_	9189 SPriNG RUN Blud, Unit 1903	
	Address	
_	BONITH SPYINGS FL 34135 City/State and Zip Code	
	City/State and Zip Code	
	SPGULL & AOL. COM  E-mail address: (to be used for future annual report notification)	•
	E-mail address: (to be used for future annual report notification)	
For furth	information concerning this matter, please call:	
Strl	P. GULLOTT. at (239) 948 - 9655  Name of Person Area Code & Daytime Telephone Number	,
Enclose	s a check for the following amount:	
□\$125.00	Filing Fee • 23130.00 Filing Fee & Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	is &
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahossos, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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:  Stephen P. Gullotti.  Name  9189 Spring Run Blvd Whit 1903  Florida street address (P.O. Box NOT acceptable)  Bondh Springs  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.	ARTICLE I - Name:		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  Principal Office Address:  Mailing Address:  Mailing Address:  Mailing Address:  9189 SPYING ROW BIND, Wait 1903 BOWTH SPYINGS, EL 34135  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:  Stephen D. GULLOTT., Name  9189 SPYING ROW BIND UNIT 1903 Florida street address (P.O. Box NOT acceptable) BOWTH SPYINGS FL 34135  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.	The name of the Limited Liability Company is	:	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  Principal Office Address:  Mailing Address:  Mailing Address:  Mailing Address:  9189 SPYING ROW BIND, Wait 1903 BOWTH SPYINGS, EL 34135  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:  Stephen D. GULLOTT., Name  9189 SPYING ROW BIND UNIT 1903 Florida street address (P.O. Box NOT acceptable) BOWTH SPYINGS FL 34135  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.	GULLOTT, HOME	e watch, LLC	
The mailing address and street address of the principal office of the Limited Liability Company is:    Principal Office Address:   Mailing Address:	(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	
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:  Stephen P. Gullotti.  Name  9189 Spring Run Blvd Unit 1903  Florida street address (P.O. Box NOT acceptable)  Bonth Springs  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.		principal office of the Limited Liability Co	ompany is:
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:  Stephen P. Gullotti.  Name  9189 Spring Run Blvd Whit 1903  Florida street address (P.O. Box NOT acceptable)  Bondh Springs  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.	Principal Office Address:	Mailing Address:	
(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:  Stephen P. Gullott,  Name  9189 Spring Run Blvd Unit 1903  Florida street address (P.O. Box NOT acceptable)  Bowlh Springs  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.	9189 SPriNG Run Blod, Unit 1903 BONITH SPRINGS, FL 34135	9189 SPYING RUN BIND, UNIT 190 BONHASPINGS, FL 34135	3
Florida street address (P.O. Box NOT acceptable)  Box/H SPINGS FL 34/35  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	(The Limited Liability Company cannot serve as its own Regi		her
Florida street address (P.O. Box NOT acceptable)  Box/H SPINGS FL 34/35  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 are:	2013 H
Florida street address (P.O. Box NOT acceptable)  Box/H SPINGS FL 34/35  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	Stephen P. Gullot	<del>ガーー                                   </del>	ž
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		e	ب ف
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	9189 SP8ING RUN.	Blud unit 1903	A 1
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	Florida street ac	ddress (P.O. Box <u>NOT</u> acceptable)	<b>ಹ</b> ್ಮ್ಮ್ಲ್ಲ್ಲ್
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	BONTH SPYINGS	FL 34135	32
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	City, S	state, and Zip	
Ttyl Paltte	liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and comple	this certificate, I hereby accept the appoin ecity. I further agree to comply with the pro ete performance of my duties, and I am fam	tment as ovisions of piliar with
Registered Agent's Śignature (REQUIRED)	Rehistered Agent's Sign	Sultti "	

(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> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Stephen P. GULLOTT; 9189 SPrING RUN BIVD, UNIT 1903 BONITA SPRINGS, FL 34135
MGKM	
·	MARY ANN GULLOTTI 9189 SPYING RUN BIND, UNIT 1903 BONITA SPOINGS, FL 34135
	· · · · · · · · · · · · · · · · · · ·
	2013 MAR SHOWE I
	SEE AN
(Use attachment if necessary)	88 32 2004
CLE V: Effective date, if other than	n the date of filing: (OPTIONAL)
	nust be specific and cannot be more than five business d
to or you days after the date of time	67
REQUIRED SIGNATURE:	
Signature of a me	ember or an authorized representative of a member.
constitutes an affirmation u I am aware that any false ir	n 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State release provided for in s.817.155, F.S.)
	In P Gullotti

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)

Typed or printed name of signee