

L13000070790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

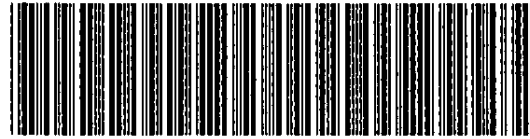
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

MAY 15 2013

S. TONER

Office Use Only



200247332952

05/14/13--01004--016 **51.25

04/30/13--01019--017 **78.75

FILED
13 MAY 14 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Attn: Ruby

In error, a corporation form, with a check in the amount of \$78.75, was submitted.

The correct LLC form with a check in the amount of \$51.25, the remainder of the \$130⁰⁰, is enclosed.

RECEIVED

13 MAY -7 PM 12:21

IN THE OFFICE OF THE CLERK

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Thompson Painting & Home Improvement 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:

Quinton Michael Thompson

Name of Person

Thompson Painting & Home Improvement LLC

Firm/Company

111 Lake Whistler Drive

Address

Auburndale , Florida 33823

City/State and Zip Code

qmt0031@gmail.com

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

For further information concerning this matter, please call:

Quinton Michael Thompson at 863 528-2547

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

RECEIVED
13 MAY - 7 PM 12:21
DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Thompson Painting & Home Improvement 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:

111 Lake Whistler Drive

Auburndale, FL 33823

Mailing Address:

111 Lake Whistler Drive

Auburndale, FL 33823

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:

Quinton Michael Thompson

Name

111 Lake Whistler Drive

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

Auburndale

FL

City, State, and Zip

FILED
13 MAY 14 AM 9:06
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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Quinton Michael Thompson

111 Lake Whistler Drive

Auburndale, FL 33823

(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.)

Quinton Michael Thompson

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)