# 13000012199

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Oity/Otate/Zip/i Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400247177424

05/07/13--01009--013 \*\*125.00

VOLED SHOWN THE STATE OF STATE

MAY 1 7 2013

T CLINE



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 8, 2013

GELNN STILWELL 5580 FOUNTAIN LAKE CIRCLE #307 BRADENTON, FL 34207

SUBJECT: GLENN STILWELL HANDYMAN BRIT LLC

Ref. Number: W13000027207

We have received your document for GLENN STILWELL HANDYMAN BRIT LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

List the name of the company in article I.,

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90.days after the date of filing. Our office received your document on May 7, 2013. See Please amend your document accordingly.

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.

Tammi Cline Regulatory Specialist II

Letter Number: 013A00011310

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

". Glenn Stilwell Handyman Brit 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:

Glenn S	Stilwell					
<u> </u>		Name of Person				
Glenn S	Stilwell Handy	man Bri	t LLC			
<del></del>		Firm/Company				_
5580 F	ountain Lake	Circle #3	307		. ••1	
<del>a de de maria e colo e men</del> menda de medica e en manda madre		Address				=
Braden	ton FL34207					
	Cit	ty/State and Zip Cod	le		<u> </u>	
glennstilw	ell@yahoo.com					
<del>-                                    </del>	E-mail address: (to be used	for future annual rep	ort notification)			
For further information	concerning this matter, please	e call:				3: 3: 3:
Glenn Stilv	vell	_at (941	, 201-6	324		1
Name	of Person		le & Daytime Tele	phone Number		
Enclosed is a check fe	or the following amount:					
☑\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fili Certified Co (additional cop	ору	\$160.00 Fili Certificate of Certified Co (additional co	of Status opy	&

#### **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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

		ELL HANDY Limited Liability Company,		The second secon	= -
ARTICLE II - Ad	dress:				
The mailing address	s and street addres	s of the principal off	ice of the Lin	nited Liability	Company is:
Principal Office A	ddress:	<u>Mailing</u>	Address:		
5580 Fountain Lake Circ	cle #307	5580 Four	ntain Lake Circle	#307	
Bradenton FL 34207		Bradenton	FL 34207		_
business entity with an a The name and the F	·	Stiluell Name	gent are:	- - #3	nother 2013 MAY -7 PH 3:
	Flori	da street address (P.O. B	ox NOT accept	able)	3E 2
	Bradesta		4207	·	p= -
	127,000	City, State, and Zip	>445 1	-	
liability compan registered agent a	y at the place designd agree to act in	ent and to accept serv gnated in this certifica this capacity. I furth ad complete performa	ate, I hereby a er agree to co	accept the appo comply with the p	ointment as provisions of

(CONTINUED)

Registered Agent's Signature (REQUIRED)

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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:

MGR	Glenn Stilwell	
	5580 Fountain Lake Circle #307	
	Bradenton FL 34207	
<del></del>		
	**************************************	
<del></del>		
<del></del>		
(Use attachment if necessary)		**;
	C/15/12 FE	
ARTICLE V: Effective date, if other than	the date of filing: $04-15-13$ $5/15/13$ . (OPTIONAL)	3 <sup>-3</sup>
(If an effective date is listed, the date n	nust be specific and cannot be more than five business d	ays:
prior to or 90 days after the date of filing	g.)	***
	$\mathbb{R}^{\mathbb{Z}}$ $\omega$	`• .
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.)

GLEWN STILWELL
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)