

L13000094132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

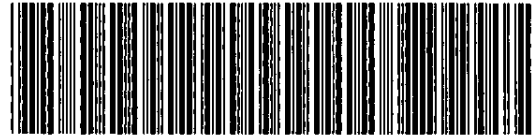
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

JUL 1 2013

S. TONER

Office Use Only



300248594463

06/28/13--01002--017 \*\*55.00

06/10/13--01024--011 \*\*70.00

FILED  
13 JUN 27 PM 4:03  
SECRETARY OF STATE  
TALLAHASSEE, FL 09117

132  
505  
11-11-13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 11, 2013

PAT CASEY PAINTING, LLC  
4775 SE MANATEE TER  
STUART, FL 34997

SUBJECT: PAT CASEY PAINTING, LLC  
Ref. Number: W13000033843

We have received your document for PAT CASEY PAINTING, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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) 245-6052.

Justin M Shivers  
Regulatory Specialist II  
New Filing Section

Letter Number: 313A00014626

(850) 245-6051.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pat Casey Painting 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:

Pat Casey  
Name of Person  
Pat Casey Painting  
Firm/Company  
4775 SE Manatee Tr  
Address  
Stuart, FL 34997  
City/State and Zip Code  
pcasey254@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pat Casey at (772) 631 0357  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee  
#70.00 check  
already sent,
- ☐ \$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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Pat Casey 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:

4775 SE Manatee Tr  
Stuart, FL 34997

### Mailing Address:

Same

## 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:

Pat Casey  
Name  
4775 SE Manatee Tr  
Florida street address (P.O. Box **NOT** acceptable)  
Stuart, FL 34997  
City, State, and Zip

FILED  
JUN 27 PM 4:08  
13  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

*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

~~AT & T~~

MGR

**Name and Address:**

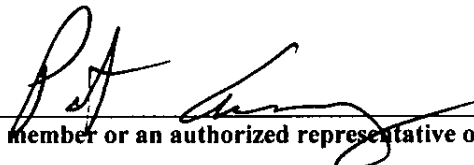
Pat Casey  
4775 SE Manatee Ter  
Stuart, FL 34997

(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.)

Pat Casey  
\_\_\_\_\_  
Typed or printed name of signer

**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)