

# L13000124205

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

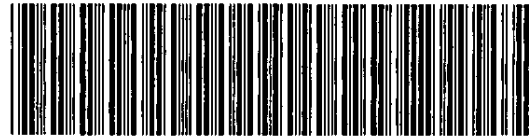
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2013 AUG - 7 PM 3:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Gulligan SEP 3 - 2013

(850) 245-6051.

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: CERRONE BUILDERS, 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:

**ANGELO N. CERRONE**

Name of Person

**N/A**

Firm/Company

**8126 SE WOODLAKE LANE**

Address

**HOBE SOUND, FL 33455**

City/State and Zip Code

**acerron@aol.com**

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

For further information concerning this matter, please call:

**ANGELO N. CERRONE** at **772** **600-8375**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 8, 2013

ANGELO N. CERRONE  
8126 SE WOODLAKE LANE  
HOBE SOUND, FL 33455

SUBJECT: CERRONE BUILDERS, LLC  
Ref. Number: W13000044299

We have received your document for CERRONE BUILDERS, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 313A00019032

**CERRONE BUILDERS, INC**  
8126 SE Woodlake Lane  
Hobe Sound, FL 33455

Tele: 561 596-3883  
Home/Fax: 772 600-8375  
E-mail: Acerron@aol.com

September 3, 2013

To: Ms Neysa Culligan  
Florida Dept. of State  
Division of Corporations

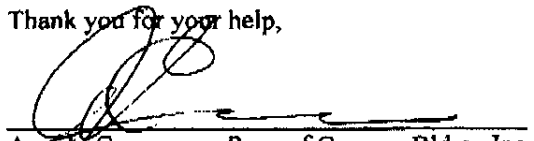
Re: Your Letter: 313A00019032  
Create Cerrone Builders, LLC

Dear Ms. Culligan,

As just discussed on the telephone, I currently have a corporation – Cerrone Builders, Inc. , which is in the process of being dissolved. And, I want to create a new LLC - Cerrone Builders, LLC.

I trust the above is satisfactory, in order to proceed. I've attached your letter as reference.

Thank you for your help,

  
Angelo Cerrone, as Pres. of Cerrone Bldrs., Inc.

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

CERRONE BUILDERS, 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:

8126 SE WOODLAKE LANE

HOBE SOUND, FL 33455

### Mailing Address:

8126 SE WOODLAKE LANE

HOBE SOUND, FL 33455

## 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:

ANGELO N. CERRONE

Name

8126 SE WOODLAKE LANE

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

HOBE SOUND, FL 33455

City, State, and Zip

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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:**

MGRM

ANGELO N. CERRONE

8126 SE WOODLAKE LANE

HOBE SOUND, FL 33455

\_\_\_\_\_

or

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 08/07/2013. (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.)

ANGELO N. CERRONE

\_\_\_\_\_  
Typed or printed name of signee

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2013 AUG -7 PM 3:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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)**