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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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J. SAULSBERRY EXAMINER SEP 9 2013

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: A-Smooth Comphics, "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:	
Anthony Holmes	-
A-Smooth Graphics, "LLC"	-
1906 NW 8th Road	•
Gainesville, Florida 32606 ===	-
Amperamo 9 mail. com E-usal address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Anthony Holmes at 352 281-5508 8	
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee □\$130.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Mailing Address Street/Courier Address	
Registration Section Registration Section	
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building	
Tollohagga W 2021.1 2661 Examples Cantag Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

, ,	
A-Smooth Grap (Must end with the words "Limited Link)	Dhice "LLC." or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pa	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
11906 NW Sty Road Cainesville, Fl 32606	11906 NW 8th Boad Gainesville, FT 32606
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness emity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Anthony h	Holmes 3
1906 Nw 81	th Road Iddress (P.O. Box NOT acceptable)
Cainesville	FL Shlob State, and Zip
TP 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

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)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Anthony Holmes 1906 NW 8th Boad Gamesville JC 32606
(Use attachment if necessary)	
-	the date of filing: (OPTIONAL) ust be specific and cannot be more than five business d
)
or 90 days after the date of filing.	
or 90 days after the date of filing. REQUIRED SIGNATURE:	Holy of a member of a member
REQUIRED SIGNATURE: Signature of a mem (In accordance with section 6 constitutes an affirmation und I am aware that any false info	Home -

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)

ARTICLE IV- Manager(s) or Managing Member(s):