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Certified Copies	_ Certificates	s of Status
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D. BRUCE

## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

A T Home Repair

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Andrew Turman			
Name of Person		-	
A T Home Repair			
Firm/Company		_	
4900 Balboa Drive			
Address	Tarint P	- -	
Orlando, FL 32808		nes SEP	1
City/State and Zip Code	[]	~ · ·	MANAGES,
x JAWWM546@YAHOO.COM	SSER		***********
E-mail address: (to be used for future annual report notification)	100	PH	1 6 1
For further information concerning this matter, please call:	10. 1.S	<u>'2</u>	F
Andrew Turman 407 523-1773	の河	PH 12: 53	
Name of Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:  \$\begin{align*} \text{\$\text{\$\text{\$}}\text{\$\text{\$}}} &  \text{\$\text{\$\text{\$}}\text{\$\text{\$}}} &  \text{\$\text{\$\text{\$}}\text{\$\text{\$}}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}}\text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\text{\$\text{\$}}\text{\$\text{\$}}\text{\$\text{\$}} &  \text{\$\text{\$}}\	ing Fee		

Certificate of Status

Certified Copy (additional copy is enclosed) 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

	e Limited Liability Com	ipany is:	
A T Home Repa	ir LLC		
	(Must end with the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II	· Address:		
The mailing ad	dress and street address	of the principal office of the Limited Liab	ility Company is:
Principal Offi	ce Address:	Mailing Address:	
4900 Balboa Dr	ve		
Orlando, FL 328	08		
<del></del>			
(The Limited Liabil		egistered Office, & Registered Agent's S own Registered Agent. You must designate an individu	al or another
(The Limited Liabil business entity wit	ity Company cannot serve as its h an active Florida registration.)	own Registered Agent. You must designate an individu	al or another
(The Limited Liabil business entity wit	ity Company cannot serve as its h an active Florida registration.)	own Registered Agent. You must designate an individu	al or another
(The Limited Liabil business entity wit	ity Company cannot serve as its in an active Florida registration.)	own Registered Agent. You must designate an individu	al or another  2019 SEP   1
(The Limited Liabil business entity wit	ity Company cannot serve as its in an active Florida registration.)	own Registered Agent. You must designate an individu	al or another  2019 SEP   1
(The Limited Liabil business entity wit	the Florida street address  Andrew Turman  4900 Balboa Drive	own Registered Agent. You must designate an individu	al or another  2019 SEP   1
(The Limited Liabil business entity wit	the Florida street address  Andrew Turman  4900 Balboa Drive	own Registered Agent. You must designate an individus of the registered agent are:  Name	al or another

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)

Page 1 of 2

## The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM **Andrew Turman** 4900 Balboa Dr Orlando, FL 32808 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing. (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-iconstitutes 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.)

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)

Andrew Turman

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

Typed or printed name of signee