L13000139570

| (Re | equestor'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: | | |
| | | |
| | | |
| | | |



800251614748

09/16/13--01041--018 **150.00

☆***** 10/04/13--01006--005 **10.00

MI OCT -2 PH 1:48

Office Use Only

1013-51517

EFFECTIVE DATE 10/01/13

OCT 0 3 2013

D. BRUCE

(850) 245-6051

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MCHONALO PAINTING FLOORING 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:

| METCHELL Mª DONALD | | |
|--|---|------------------------|
| Name of Person | | |
| MCDONALD PAINTING & FLOORING | 2, LLC | > |
| 7' ····· Mile ···· ·· · · · · · · · · · · · · · · · | • | |
| 12490 SE 105th CT. | 100 B | |
| Address | | |
| | | |
| SELLEVIEW, FL 34420 City/State and Zip Code | 32 T | - |
| City/State and Zip Code | 第三 | 8 |
| mary fagaly @ Yahoo. com E-mail address: (to be used for future annual report notification) | 기위 공 | |
| E-mail address: (to be used for future annual report notification) | ⊋ ** ** | - Carentina |
| For further information concerning this matter, please call: | 24. | |
| Mitchell McDonald = (352, 812-7585 | , 5 | |
| Name of Person Area Code & Daytime Telephone Number | | |

Enclosed is a check for the following amount:

□\$125.00 Filing Fee □\$130.00 Filing Fee &

\$130.00 Filing Fee & Certificate of Status 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2013

MITCHELL MCDONALD 12490 SE 105TH COURT BELLEVIEW, FL 34220

SUBJECT: MCDONALD PAINTING & FLOORING, LLC

Ref. Number: W13000051517

We have received your document for MCDONALD PAINTING & FLOORING, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The converting Florida entity must be active on our records.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 113A00021795,

海鲁 OCT -2 PM 1:48

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Mc Donald Painting & (Must end with the words "Limited Liability | Frooring LLC. | | |
|---|------------------|--|--|
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: | | | |
| Principal Office Address: | Mailing Address: | | |

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: Mitchell Mc Lonald Name 12490 SE. 105 th CT. Florida street address (P.O. Box NOT acceptable) Belleview FL 34470 | TILED THE OCI -2 PH 1:48 SECRETARY OF STATE TARLIAHASSEE FEORIO |
|---|--|
| City. State, and Zip | ₩ ∞ |

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



ARTICLE I - Name:

The name of the Limited Liability Company is:

| <u>Title:</u> "MGR" = Manager | Name and Address: | |
|---|---|--|
| "MGRM" = Managing Member Manager | Mitchell Mc Donald 12490 St. 105 EUCT Belleview, FL 34420 | |
| | | |
| | | |
| (Use attachment if necessary) | ate of filing: October 1 5t/2013 | |
| ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be prior to or 90 days after the date of filing.) | be specific and cannot be more than five business days | |
| REQUIRED SIGNATURE: | 1 My let 1 ARY SEE | |
| 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.) | | |
| Mitchell | Mc Donald d or printed name of signee | |
| Filling Fees: | | |
| \$175.00 Filing Fee for Articles of Organiz | ration and Designation | |

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

of Registered Agent
S 30.00 Certified Copy (Optional)
S 5.00 Certificate of Status (Optional)