

L13000/58055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

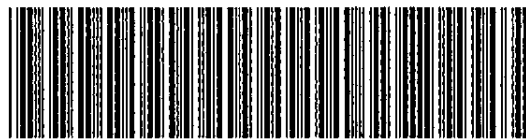
Special Instructions to Filing Officer:

NOV 12 2013

A. LUN.

W13-51888

Office Use Only



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09/16/13--01005--028 **125.00

RECEIVED
TALLAHASSEE, FLORIDA

2013 NOV -9 PM 12:59

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 18, 2013

JARLEAN WATKIS
1114 NW 6TH ST. APT #4
GAINESVILLE, FL 32601

SUBJECT: J.K. WATKINS CLEANING & PAINTING L.L.C.
Ref. Number: W13000051888

We have received your document for J.K. WATKINS CLEANING & PAINTING L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

You can not list our P.O. BOX as your principal office address.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 313A00021952

2013 NOV - 8 PM 1:59
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILED

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J. F. WATKINS CLEANING & PAINTING L.L.C.
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:

JARLEAN WATKINS
Name of Person

J. F. WATKINS CLEANING & PAINTING L.L.C.
Firm/Company

1114 NW 6th ST. Apt # 4
Address

GAINESVILLE FL, 32601
City/State and Zip Code

redhead5242@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JARLEAN WATKINS at (352) 575-7096
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$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

FILED
2013 MAY - 8 PM 1:08
TALLAHASSEE, FLORIDA
CLERK OF COURT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J. F. WATKINS CLEANING & PAINTING L.L.C.
(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:

Mailing Address:

1114 N.W. 6th St Apt #4
Gainesville Fl. 32601
N.W. 11th Ave

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:

Jarlean Watkins
Name

1114 NW 6th ST. Apt #4
Florida street address (P.O. Box **NOT** acceptable)

Gainesville FL, 32601
City, State, and Zip

2013 NOV - 8 PM 12:59
FILED
CLERK OF DISTRICT COURT
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..

Jarlean Watkins
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:

MGR

Jarlean Watkins
1114 NW 6th St Apt #4
Gainesville, FL 32601

MGRM

Furnell Mitchell
1114 NW 6th St Apt #4
Gainesville, FL 32601

(Use attachment if necessary)

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.)

2013 MAY -8 PM EST
FILED
CLERK
STATE OF FLORIDA

REQUIRED SIGNATURE:

Jarlean Watkins
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.)

JARLEAN WATKINS
Typed or printed name of signee

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)