

L13000176541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

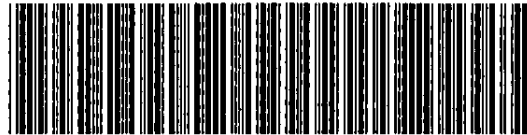
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Office

Office Use Only



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12/06/13--01014--014 \*\*130.00

EFFECTIVE DATE  
1/1/14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 DEC 26 PM 12:54

-FILED

N. Gangan DEC 26 2013

(850) 245-6051.

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: BUILDING SOLUTIONS OF THE KEYS 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:

Aaron Greenop

Name of Person

Building Solutions of the Keys LLC.

Firm/Company

PO BOX 504311

Address

Marathon, FL 33050

City/State and Zip Code

agreenop@hotmail.com

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

For further information concerning this matter, please call:

AARON GREENOP

Name of Person

at (305) 393-5264

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 11, 2013

AARON GREENOP  
PO BOX 504311  
MARATHON, FL 33050

SUBJECT: BUILDING SOLUTION OF THE KEY LLC  
Ref. Number: W13000067693

We have received your document for BUILDING SOLUTION OF THE KEY LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Verify the name the word "KEY".

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: 213A00028146

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

BUILDING SOLUTIONS OF THE KEYS LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

AMK  
Dec 16, 2013

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

### Mailing Address:

Building Solutions of the Keys LLC.  
#3 72nd St. Ocean  
Marathon, FL 33050

Buildings Solutions of the Keys LLC.  
PO Box 504311  
Marathon, FL 33050

## 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:

BRUCE GREENOP

Name

2908 MANATEE RD

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

TAUARES FL 32778

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..*

Bruce Greenop  
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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Aaron Greenop  
#3 72nd St. Ocean  
Marathon, FL 33060

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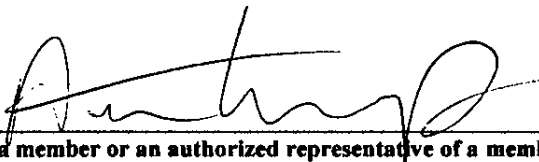
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: January 1<sup>st</sup>, 2014. (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.

Dec 4, 2013

(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.)

AARON GREENOP

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)**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 DEC 26 PM 12:54

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