## 114000004865

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>=</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

TO:	Registration S Division of Co			
SUBJE	ст: <u>М</u> ос	eno's Painting S	Sec Vi CAS LLC. ed Liability Company	<del></del>
The encl	losed Articles of	Organization and fee(s) are s	submitted for filing.	
Please n	eturn all corresp	ondence concerning this matte	er to the following:	
_	/	flex Moreno Lo	Name of Person	
			Name of Person	
_			Firm/Company	
_		506 Plantation	7 Grove Ct. Address	
	_			
-	[2]	ant City FL City	33566 y/State and Zip Code	
		·	for future annual report notification)	
		concerning this matter, please		
Ale	x Mosen	olara	at (8/3) 650-/6 Area Code & Daytime Telepl	049
	Name	of Person	Area Code & Daytime Telepl	hone Number
Enclose	ed is a check fo	or the following amount:		
⊒\$125.0	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 Ci	ircle

Tallahassee, FL 32301



December 20, 2013

ALEX MORENO LARA 1506 PLANTATION GROVE CT PLANT CITY, FL 33566

SUBJECT: MORENO; S PAINTING SERVICES, LLC

Ref. Number: W13000069404

We have received your document for MORENO; S PAINTING SERVICES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the articles of organization, page one was not recieved.

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.

Tim Burch Regulatory Specialist II

Letter Number: 413A00028914

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Moreno's Painting Services LLC (Must end with the woods "Limited Liability Company, "L.L.C." or "LLC.")
(1916) and with the winds Linkwe Likebilly Company, 1918-0-, of the c.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
1506 Plantation Grove Ct. Apt. 1017 Plant City, FL 33566 Plant City, FL 33566
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:
Alex Moreno Lara
Name
1506 Plantation Grove Ct. #1017 Su
Florida street address (P.O. Box NOT acceptable)
Plant Cita # 33566
1506 Plantation Grove Ct. #1017 Florida street address (P.O. Box NOT acceptable)  Plant City FL 33566  City Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company of the place designated in this certificate, I hereby accept the appointment as registered agent and agree to got in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and camplete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.
alex Mour
Revistered Agent's Signature (REOLIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" - Authorized Member "MGR" = Manager	Name and Address:	
MGR	Alex Moreno	
	Mant City, FL 33560	
		Project Control of the Control of th
		<u> </u>
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E V: Effective date, if other than the date of ective date is listed, the date must be spec of filing.)	f filing: 1/9/14 ific and cannot be more than five busine	
E V: Effective date, if other than the date of sective date is listed, the date must be special filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:		
EV: Effective date, if other than the date of sective date is listed, the date must be special filing.)  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a mem  (In accordance with section 60 constitutes an affirmation und I am aware that any false info	filing: 1/9/14  ific and cannot be more than five business  aber or an authorized representative of 105.0203 (1) (b), Florida Statutes, the executer the penalties of perjury that the facts stormation submitted in a document to the Dony as provided for in s.817.155, F.S.)	a member.  ation of this documented herein are true.
E V: Effective date, if other than the date of feetive date is listed, the date must be spec of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a mem  (In accordance with section 60 constitutes an affirmation und I am aware that any false info	aber or an authorized representative of 05.0203 (1) (b), Florida Statutes, the executer the penalties of perjury that the facts stormation submitted in a document to the D	a member.  ation of this documented herein are true.

Page 2 of 2