

#L14000007664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

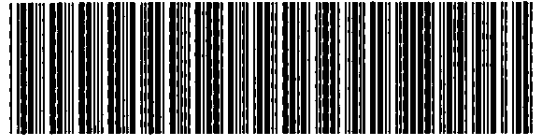
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000254570110

12/16/13--01010--002 \*\*130.00

EFFECTIVE DATE  
1-15-2014

FILED  
2013 DEC 16 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALLY  
EXAMINER

JAN 15 2014



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 17, 2013

PROPHETE PIERRE  
2975 24TH AVE. SE  
NAPLES, FL 34117

SUBJECT: P & M SERVICES, "LL.C"  
Ref. Number: W13000068821

We have received your document for P & M SERVICES, "LL.C" and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L04000043957 "P. M. SERVICES, LLC".

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 913A00028645

(850) 245-6051.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: P & M SERVICES, "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:

PROPHETE PIERRE  
Name of Person

\_\_\_\_\_  
Firm/Company

2975 24TH AVE SE  
Address

NAPLES FL 34117  
City/State and Zip Code

PROPHETEP@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PROPHETE PIERRE at (239) 687-6818  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: P & M PRO. SERVICES "LLC"

P & M PRO SERVICES, "LLC"

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

EFFECTIVE DATE  
1-15-2014

**ARTICLE II - Address:**

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

**Principal Office Address:**

**Mailing Address:**

2975 24TH AVE SE  
NAPLES FL 34117

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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.)

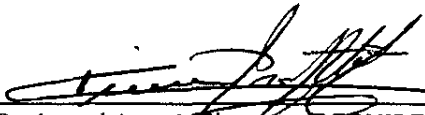
The name and the Florida street address of the registered agent are:

PROPHETE PIERRE  
Name

2975 24TH AVE SE  
Florida street address (P.O. Box **NOT** acceptable)  
NAPLES FL 34117  
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..*

  
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

MGR

**Name and Address:**

PROPHETE PIERRE  
2975 24TH AVE SE  
NAPLES FL 34117

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: JAN. 15-2014 (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.

(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.)

PROPHETE PIERRE  
Typed or printed name of signer

**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)