

L1400 0017638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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JAN 31 2014

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TALLAHASSEE, FLORIDA  
JAN 31 PM 3:19



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 28, 2014

SANDE THOMAS  
PO BOX 7456  
PANAMA CITY BEACH, FL 32413

SUBJECT: QUALITY CONSTRUCTION & CLEANING SVCS, LLC  
Ref. Number: W14000005649

We have received your document for QUALITY CONSTRUCTION & CLEANING SVCS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return the corrected original and one copy of 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.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 614A00001837

(850) 245-6051.

## COVER LETTER

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

SUBJECT: Quality Construction & Cleaning Svcs, 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:

Sande Thomas, CPA

Name of Person

Accounting Now FL LLC

Firm/Company

P O Box 7456

Address

Panama City Beach, FL 32413

City/State and Zip Code

actnow1999@gmail.com and Patrickbroome40@gmail.com

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

For further information concerning this matter, please call:

Patrick Broome

Name of Person

at ( 850 ) 714-4544

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input 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:

Quality Construction & Cleaning Svcs, LLC

(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:

131 Oleander Drive St. Circle PB  
Panama City Beach, FL 32413

#### Mailing Address:

P O Box 7456  
Panama City Beach, FL 32413

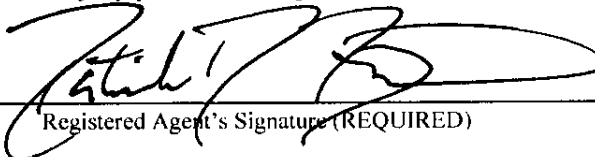
### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

Patrick D Broome  
Name  
131 Oleander Drive St. Circle PB  
Florida street address (P.O. Box **NOT** acceptable)  
Panama City Beach FL 32413  
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)

**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:**

MGRM

Patrick D Broome

131 Oleander Drive *St. Circle PB*

Panama City Beach, FL 32413

MGR

Jill E Broome

131 Oleander Drive *St. Circle PB*

Panama City Beach, FL 32413

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

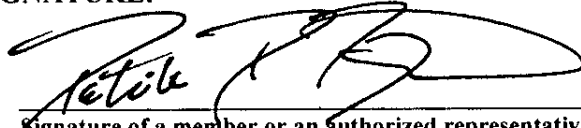
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

Patrick D Broome

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)**

14 JAN 30 PM 3:19  
TALLAHASSEE  
STATE DEPARTMENT OF  
REVENUE