

L1400000 21789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

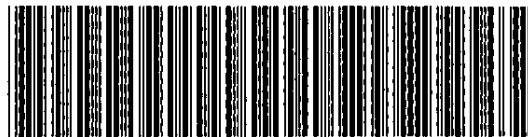
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Michelle Zoldan GAVE
AUTHORIZATION BY PHONE TO
CORRECT RA name to remove her
DATE 2/7/14
DOC. EXAM (signature)

Office Use Only



800255549678

01/21/14--01051--008 **160.00

Effective Date

1/16/14

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 21 PM 3:46

217
(signature)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AquaZOL Plumbing
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:

PAUL Zoldan
Name of Person

AquaZOL Plumbing
Firm/Company

3344 Lee St
Address

Hollywood Florida, 33021
City/State and Zip Code

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

For further information concerning this matter, please call:

Michelle Zoldan at (954) 962-1601
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
14 JAN 21 PM 3:44
SECRETARY OF STATE
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2014

PAUL ZOLDAN
3344 LEE ST
HOLLYWOOD, FL 33021

SUBJECT: AQUAZOL LLC
Ref. Number: W14000006279

We have received your document for AQUAZOL LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can only list 1 person as your registered agent. Please remove either PAUL ZOLDAN or MICHELLE ZOLDAN; also remove the signature of that person also.,

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) 245-6951.

JENNA D HARRIS
Regulatory Specialist II

Letter Number: 214A00002121

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 21 PM 3:44

Effective Date

1/16/14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AquaZOL 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:

Mailing Address:

3344 Lee St
Hollywood, FL
33021

SAME

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:

PAUL ~~Michelle~~ Zoldan

Name

3344 Lee St

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

Hollywood

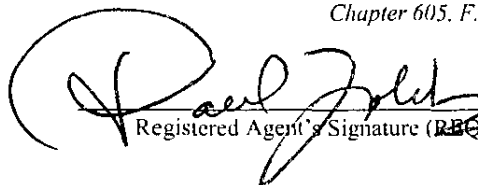
FL

33021

City

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 605, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

PAUL ZOLDAN AMBR

MICHELLE ZOLDAN
AMBR

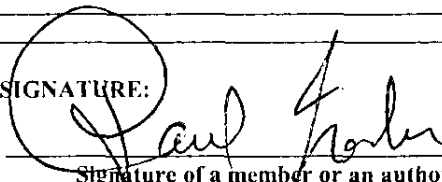
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1-16-2014 (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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), 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.)

PAUL ZOLDAN

Typed or printed name of signee

1-16-14

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)