L14000024797

(Red	questor's Name)	<u></u>
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies		
Special Instructions to I	Filing Officer:	

Office Use Only



000255863220

02/10/14--01014--026 **155.00

14 FEB IO PH 3: 35
SECRETARY OF STATE
TAIL AHASSEE FLOBING

T-Bursh FEB 13 2014



COVER LÉTTER

TO:

Registration Section

Division of C	Corporations		
SUBJECT: R	ght Const	RUCTION AND	Restoration L
The enclosed Articles	of Organization and fee(s)	are submitted for filing.	
Please return all corres	spondence concerning this r	natter to the following:	
Vai	nessa M.	Name of Person	
		Firm/Company	
	8 LENT Ri	Address	
Apo _t Right	oka , FL ,	32712 City/State and Zip Code C 176N D Yahod ed for future annual report notifica	o. Com
For further information	n concerning this matter, ple	ease call:	
Vanessa	M. Sannasy ne of Person	732) 979-94 Area Code Daytime Te	154 lephone Number
Enclosed is a check fo	r the following amount:		
□ \$125.00 Filing Fec	□\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ling Address	Street/Courier Add	ress

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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:

Right Construction and (Must end with the words "Limited Li	Restoration LLC iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office.	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
ABOPKA, FL 32712	5764 N. ORANGE Blossom TRAIL # 101 ORLANDO, FL. 88 32810-1023
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered as Name	gent are: ANTAGO ANT
Florida street address (P.O. Box N	NOT acceptable) FL 327/2 FL 327/2 FL 327/2
Having been named as registered agent and to accept servi	ice of process for the above stated limited liability company at

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.

Page 1 of 2

(CONTINUED)

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Vanossam. Samaso
MUR	2878 LEN+ RO. BOOKO FL 32712
	- KEC:
E V: Effective date, if other than the date ective date is listed, the date must be sp	c of filing: (OPTION DECEMBED CONTINUES OF STREET OF STREE
ective date is listed, the date must be spof filing.)	e of filing:
E V: Effective date, if other than the date	e of filing:
E V: Effective date, if other than the date ective date is listed, the date must be spof filing.) E VI: Other provisions, if any.	e of filing:
E V: Effective date, if other than the date ective date is listed, the date must be spof filing.) E VI: Other provisions, if any.	e of filing:
EV: Effective date, if other than the date ective date is listed, the date must be spof filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m	c of filing:
EV: Effective date, if other than the date ective date is listed, the date must be spof filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6) constitutes an affirmation und	e of filing:
E V: Effective date, if other than the date ective date is listed, the date must be spot filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 60 constitutes an affirmation und I am aware that any false info	e of filing:
E V: Effective date, if other than the date ective date is listed, the date must be spof filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 60 constitutes an affirmation und I am aware that any false info	e of filing:
E V: Effective date, if other than the date dective date is listed, the date must be spot filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 60 constitutes an affirmation und I am aware that any false info constitutes a third degree felo	e of filing: