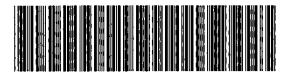
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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SECRETARY OF STATE STATIONS DIVISION OF CORPORATIONS



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Glory Moving and Hauling, 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:			
Curtis Lemons Jr.			
Name of Person			
Firm/Company			
2607 N. Lincoln Ave			
Tampa, FL 33607 City/State and Zip Code Glory moving amous com E-pail address: (to be used for figure annual report notification)			
For further information concerning this matter, please call:			
Curtis Lemons Jr. at (813) 240-0287 Name of Person Area Code Daytime Telephone Number			
Enclosed is a check for the following amount: \$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\ \text{Certified Copy (additional copy is enclosed)}\$\$ 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 24, 2014

CURTIS LEMONS JR 2607 N LINCOLN AVE TAMPA, FL 33607

SUBJECT: GLORY MOVING AND HAULING, LLC

Ref. Number: W14000004712

We have received your document for GLORY MOVING AND HAULING, 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):

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 17, 2014. Please amend your document accordingly.

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. The proper form is enclosed for your convenience.

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: 014A00001617

14 JAN 17 AM 7: 59

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Glory Moving and Houling LLC (Mustlend 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:
2607 N. LINCOLN AVE SAME
Tampa, FL 33607
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:
2607 N. Lincoln AVE
Florida street address (P.O. Box <u>NOT</u> acceptable)
City Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company 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)

Page 1 of 2

Title:	n authorized to manage and control the Limited Liability Company:
"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Purdis Lamores To
MGR	2/07 N. 21000/0 ALL
/ V	Tanga, Fl 33607
AMBR.	Wanda Lemons
71111212	2601 N. Kincoln Ave
1 11 0 0	- Tampa, FL 33607
AMBR	Dermaine Lemons
	2607 N. Lincoln Ave
AMBO	- 100 pt 1 2 35007
TINDI	Jashanda Lemons
	Tampa FL 33607
(I) as attended on if a consumer	
(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 the date of filing.)	e specific and cannot be more than five business days prior to or 90 days after
_	
ARTICLE VI: Other provisions, if any.	
<u>required</u> signature:	10 0
+ Curt	La Lamona (1
Signature of a	member or an authorized representative of a member.
(In accordance with sect constitutes an affirmation	ion 605.0203 (1) (b), Florida statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true.

Filing Fees:

I am aware that any false information submitted in a document to the Department of State

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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