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PICK-UP	☐ WAIT	MAIL
(Ba	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
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J. Stavers MAR 1 8 2014

·COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: America's Best Closers Tampa	mited Liability Company
. Name of this	micu Daomiy Company
The enclosed Articles of Organization and fee(s) a	re submitted for filing.
Please return all correspondence concerning this m	natter to the following:
John Black	
	Name of Person
America's Best Closers Tampa, LL	.C
	Firm/Company
1508 Pine Lake Drive	•
1300 I Me Lake Dilve	Address
Tamas Flacida 00040	•
Tampa, Florida 33612	City/State and Zip Code
isblackpro@gmail.com	d for future annual report notification)
•	•
For further information concerning this matter, ple	ase call:
	813) 503-2734
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	•
□ \$125.00 Filing Fee	□\$155.00 Filing Fee & □\$160.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
The hane of the Brance Blanning Company in	
America's Best Closer Tampa, LLC	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
John Black 1508 Pine Lake Drive Tampa, Fl 33612	Same
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.) The name and the Florida street address of the registered agents.	egistered Agent. You must designate an individual or)
John Black Name	
1508 Pine Lake Drive	
Florida street address (P.O. Box N	NOT acceptable)
Tampa	FL 33612 Zip
City	Zip
the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice of process for the above stated limited liability company at he appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance actions of my position as registered agent as provided for in 605, F.S
Registered Agent's Signatur	
(CONTINUE)	D)

Page 1 of 2

fitle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager.	
MGR	John Black
	1508 Pine Lake Drive
	Tampa, Fl 33612
	•
	
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Use attachment if necessary)	
V: Effective date, if other than the da	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90
V: Effective date, if other than the dative date is listed, the date must be so filing.) VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90
V: Effective date, if other than the dative date is listed, the date must be stilling.) VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90
ctive date is listed, the date must be so filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a magnetic constitutes an affirmation under a magnetic state of the constitutes and affirmation under a magnetic state of the constitutes and affirmation under a magnetic state of the constitutes and affirmation under	pecific and cannot be more than five business days prior to or 90
V: Effective date, if other than the dative date is listed, the date must be stilling.) VI: Other provisions, if any. Signature of a national (In accordance with section of constitutes an affirmation unit am aware that any false infoconstitutes a third degree felor	John Black member or an authorized representative of a member. 605.0203 (1) (b). Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)
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