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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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14 APR -7 AM 9:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Gathers APR 08 2014

Paul A. Facundus
2282 NE 63rd Street
Ocala, FL 34479
(352) 427-8885
Dobber28@embarqmail.com

March 31, 2014

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

In Re: Paul A. Facundus Mobile Home Svc., LLC Application

To Whom It May Concern:

Please find the attached, the Articles of Organization for Florida Limited Liability Company Application together with the check in the amount of \$125.00 for said filing fee. Included in this cover letter is my contact information. If you should need anything further, please feel free to contact me.

Sincerely,

Paul A. Facundus
Owner/Manager

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Paul A. Facundus Mobile Home Svc., 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:

Paul A. Facundus
Name of Person

Paul A. Facundus Mobile Home Svc., LLC
Firm/Company

2282 NE 63rd Street
Address

Ocala, FL 34479
City/State and Zip Code

dobber28@embargo@mail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul A. Facundus at (352) 427-8885
Name of Person 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 &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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 I - Name:

The name of the Limited Liability Company is:

Paul A. Facundus Mobile Home Svc., 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:

2282 NE 63rd Street

Ocala, FL 34479

2282 NE 63rd Street

Ocala, FL 34479

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 A. Facundus

Name

2282 NE 63rd Street

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

Ocala

City

FL 34479

Zip

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TALLAHASSEE, FLORIDA

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..

Paul Facundus

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

MGR

Name and Address:

Paul A. Facundus

2282 NE 63rd Street

Ocala, FL 34479

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Paul Facundus

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 A. Facundus

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)

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14 APR -7 AM 9:53
TALLAHASSEE, FL 32309
SECRETARY OF STATE