

L140000069706

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

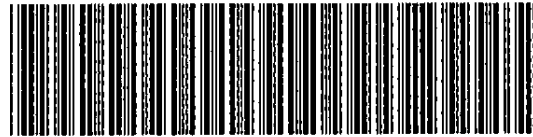
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APR 30 2014

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RECEIVED
SECTION 607.01
2014 APR 30 PM 09:18
15 ADVISORY
SUFFICIENT OF FILING

SECTION 607.01
2014 APR 30 PM 10:21
RECEIVED FLORIDA

14 APR 30 AM 10:21

APPROVED
AND
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Daniels Custom Woodworks, LLC
Name of Limited Liability Company

APPROVED
AND
FILED
14 APR 30 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BEAU DANIELS

Name of Person

Firm/Company

2525 James Duhard way

Address

Tallahassee, FL 32308

City/State and Zip Code

Beau.cabinets @ Gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Beau Daniels

Name of Person

at (850)

Area Code

570-9663

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

APPROVED
AND
FILED

14 APR 30 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Daniels Custom Woodworks, 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:

2525 Jones Duward way

Same

Tallahassee FL 32308

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:

Benn D. Daniels

Name

2525 Jones Duward way

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

Tallahassee

FL

32308

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.

Benn D. Daniels

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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AND
FILED

17 APR 30 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MGR

Bew Daniels
2525 James Oshard Way
Tallahassee FL 32308

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 4/30/14 (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:

Bew Daniels

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.)

Bew Daniels

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)