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Email Address:

FLORIDA LIMITED LIABILITY CO.

Ormond by the Sea Painting and Remodeling LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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Help

H14000267802

ARTICLES OF ORGANIZATION	ON FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	
	tinting and Remodeling LLC Limited Liability Company, "L.L.C.," or "LLC.")
(.Must end with the wirds	Limited Liability Company, E.L.C. of ELC.)
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1961 Linda Avenue Ormond Beach, FL 32174	1961 Linda Avenue Ormond Beach, FL 32174
another husiness entity with an active Florida re- The name and the Florida street address of the re Todd Van Tassel	egistered agent are:
	Name
1961 Linda Avenu	
Florida street address (F	O. Box NOT acceptable)
Ormond Beach	FL 32174
City	Zip
the place designated in this certificate, I hereb cupacity. I further agree to comply with the pro	ecept service of process for the above stated limited liability company at by accept the appointment as registered agent and agree to act in this pisions of all statutes relating to the proper and complete performance of the obligations of my position as registered agent as provided for in Chapter 605, F.S

(CONTINUED)

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Todd Van Tassel

H14000267802

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Title:	Name and Address:	
"AMBR" = Authorized Member	Traine and Address.	
"MGR" = Manager	T. 441/ T!	
MGR	Todd Van Tassel	
	1961 Linda Avenue	
	Ormond Beach, FL 32174	
MGR	Sarah Reilly	
	1961 Linda Avenue	
	Ormond Beach, FL 32174	
MGR	Ron Gibbs	
	955 Nova Road	
	Ormond, FL 32174	
MGR	Matt Vincelli	
MGR		
(Use attachment if necessary) EV: Effective date, if other than the ective date is listed, the date must be	Matt Vincelli 19 Ullian Trail Palm Coast, FL 32164 date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 9	U da
(Use attachment if necessary) EV: Effective date, if other than the ective date is listed, the date must be filling.)	19 Ullian Trail Palm Coast, FL 32164 date of filing: (OPTIONAL)	U da
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(Use attachment if necessary) E V: Effective date, if other than the ective date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with sect	date of filing:	
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(Use attachment if necessary) E V: Effective date, if other than the ective date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with sect constitutes an affirmatic I am aware that any false)	date of filing:	
(In accordance with section and fall and ware that any fall and ware thany ware that any fall and ware that any fall and ware that any fa	date of filing:	
(In accordance with section and fall and ware that any fall and ware thany ware that any fall and ware that any fall and ware that any fa	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or so member or an authorized representative of a member. 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, see information submitted in a document to the Department of State are felony as provided for in s.817.155. F.S.)	

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