## L14 000194745

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14 DEC 18 AM 10:54
SECRETARY OF STATE
NALLAHASSEE, FIDERIA

J. Shivers DEC 2 3 2014

8480 Bandera Cirele E Jacksonville, FL 32244 info@bpatrickmovers.com

Re: Requesting Name Release Doc # P12000051724

To Whom It May Concern:

As instructed by the corporate filings operator, I am drafting this letter to request that the name B. Patrick Movers be released. I have no intentions of reinstating B. Patrick Movers Inc. I have attached my application to establish my company as a limited liability corporation. Thank you in advance for assisting me with this matter as soon as possible.

\_Sincerely,

Brian Cobb; B. Patrick Movers LLC

(904)472-1314

14 DEC 18 AM 10: 54 SECRETARY OF STATE TALLAHASSEE, FLORING

## **COVER LETTER**

TO: Registration Division of C	Section Corporations		
SUBJECT: B	Patrick Mover	s. LLC	
SUBJECT	Name of Lir	nited Liability Company	<del></del>
The enclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please return all corre	spondence concerning this m	atter to the following:	
<u></u>	Brian Patrick	Cobb	
		rune or recon	
	B. Patrick	Movers, LLC	
		Firm/Company	_
8480	O Bandera C.	ir E.	
		Address	
Jac	Ksonville FC	32244  City/State and Zip Code  MOVETS COM  d for future annual report notifica	
2.4	6 /01/- 6	City/State and Zip Code	
	E-mail address: (to be used	MOVE/S · COM d for future annual report notifica	tion)
	n concerning this matter, plea		
Brian	Cobb at (	909 472-131 Area Code Daytime Tel	enhone Number
	ic of recisor	Alea code Dayanie Tel	ephone Number
Enclosed is a check for	r 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)
<u>Mail</u>	ling Address	Street/Courier Addr	r <u>ess</u>

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:	
	LC
(Must end with the words "Limit	ed 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:
8480 Bondera Cir East	8480 Bandera Cir East
Jacksonville, FL 32244	Sacksonville, FC 32244
The name and the Florida street address of the register    Srian   Cobb     Name   Name	vn Registered Agent. You must designate an individual or tion.)  red agent are:    Circle East   SSE   Registered Agent.
the place designated in this certificate, I hereby acc capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the c	service of process for the above stated limited flability company a ept the appointment as registered agent and agree to act in this as of all statutes relating to the proper and complete performance obligations of my position as registered agent as provided for in apter 605, F.S
Registered Agent's Sign	nature (REQUIRED)

(CONTINUED)
Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager  MGR	Brian Caph
	8480 Bandera (ic. East
	Jacksonville, FL 32244
EV: Effective date, if other than the date	e of filing: <u>/2-/5-20/4</u> (OPTIONAL) specific and cannot be more than five business days prior to or 9
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