

L15000072220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

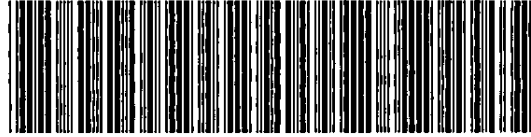
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 APR 15 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WAP
4/24/15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D & W Solar Services, 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:

Walter Gaviñanez

Name of Person

D & W Solar Services, LLC

Firm/Company

1415 E 140th Ave Apt. G

Address

Tampa, FL 33613

City/State and Zip Code

gavi.bx@gmail.com

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

For further information concerning this matter, please call:

Walter Gaviñanez

Name of Person

at (718)

Area Code

593-5882

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

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

D & W Solar Services, 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:

1415 E 140th Ave
Apt G
Tampa, FL 33613

Mailing Address:

1415 E 140th Ave
Apt G
Tampa, FL 33613

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:

Walter Gavalanez

Name

1415 E 140th Ave Apt. G

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

Tampa

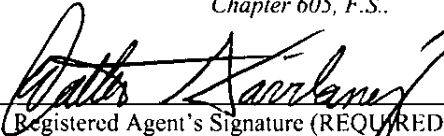
City

FL

33613

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

AMBR

AMBR

AMBR

AMBR

Name and Address:

Walter Gavilanez
1415 E 140th Ave Apt. G
Tampa, FL 33613

Anthony Cowan
4715 Land O Lakes Blvd
Land O Lakes, Florida 34639

Esteban Penalo
1419 E 139th Ave Apt 202
Tampa, FL 33613

HARVESTER SOLAR LLC
4477 Solaringa Ter
North Port, FL 34286

(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.

Walter Gavilanez 70%, Anthony Cowan 10%
Esteban Penalo 10%, Harvester Solar 10%

REQUIRED SIGNATURE:

Walter Gavilanez
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.)

Walter Gavilanez

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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