

L15000081492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

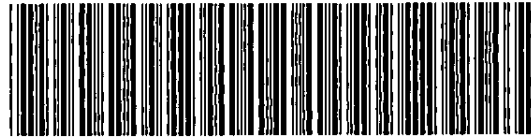
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100271663611

05/11/15--01001--007 **125.00

RECEIVED
DEPARTMENT OF STATE
DIVISION 1
15 MAY - 8 PM 2:52
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
2015 MAY - 8 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Outigan MAY - 8 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

P & P Custom Painting 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:

JACK E. PLASTER SR

Name of Person

P & P PAINTING

Firm/Company

2074 MIDYETTE RD APT. 1318

Address

TALLAHASSEE, FL 32301

City/State and Zip Code

DIVINEDESIGNUSA@YAHOO.COM

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

For further information concerning this matter, please call:

Ryan Plaster at (716) 489-5649

Name of Person

Area Code

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 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:

P & P Custom Painting 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:

2074 MIDYETTE RD
APT. 1318
TALLAHASSEE, FL 32301

Same

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:

JACK E. PLASTER SR.
Name

2074 MIDYETTE RD APT. 1318
Florida street address (P.O. Box NOT acceptable)
TALLAHASSEE, FL 32301
City State 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..

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2015 MAY -8 PM 3:00
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:
