

L150000135908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

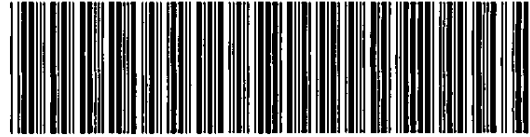
Special Instructions to Filing Officer:

name in use

L150000050823

7/17 eff.

Office Use Only



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FILED
15 JUL 20 AM 5:58
TALLAHASSEE, FLORIDA
TALLAHASSEE, FLORIDA

Lc
AUG 12 2015

R. WHITE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CBS Electrical Service, 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:

Erica Lawson

Name of Person

CBS Electrical Service, LLC.

Firm/Company

30753 Old US 20

Address

Elkhart, IN 46514

City/State and Zip Code

erica@cbsserviceinc.com

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

For further information concerning this matter, please call:

Cara Smith

574

538-2050

at ()

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

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

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2015

ERICA LAWSON
3073 OLD US 20
ELKHART, IN 46514

SUBJECT: ~~CBS SERVICE, LLC~~
Ref. Number: W15000050823

CBS ELECTRICAL SERVICE, LLC.

We have received your document for CBS SERVICE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

✓ Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Corrected
The document number of the name conflict is L14000097404.

If we have had no written response within 60 days of this letter, we will consider your document abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

New Filing Section.

Letter Number: 015A00015804

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CBS Electrical Service, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC" LAHASSEE, FLORIDA

FILED
15 JUL 20 AM 5:58

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

CBS Electrical Service, LLC.

30753 Old US 20

Elkhart, IN 46514

Mailing Address:

CBS Electrical Service, LLC.

30753 Old US 20

Elkhart, IN 46514

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 Pletcher

Name

20341 Merry Oak Ave

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

Tampa

FL

33647

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..

Walter Pletcher

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Cara Smith

56299 Bittersweet

Mishawaka, IN 46545

AMBR

Jeremy Smith

56299 Bittersweet

Mishawaka, IN 46545

AMBR

Erica Lawson

15703 State Rd 23

Granger, IN 46530

AMBR

Walter Pletcher

20341 Merry Oak Ave

Tampa, FL 33647

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 7/17/15 (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Cara Smith

Typed or printed name of signer

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)