## L15000172837

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	ə <b>#</b> )
PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

TO:	Registration S Division of Co				
SUBJE		odifications LLC			
SUBJE		Name of L	imited Liabil	ity Company	
The end	closed Articles o	of Organization and fee(s)	are submitted	for filing.	
Please 1	return all corres <sub>l</sub>	pondence concerning this 1	natter to the t	following:	
	Ryan Whel	an			
			Name of	Person	
	A & G Mo	difications LLC			
			Firm/Co	mpany	<del></del>
	584 Silverg	gate Loop			
		-	Addr	ess	
	Lake Mary	FL 32746			
	agmodificati	ons@gmail.com	City/State an	d Zip Code	
		E-mail address: (to be use	ed for future a	nnual report notificat	tion)
For furth	er information c	oncerning this matter, plea	ase call:		
	Ryan Whela	an at (	407	4970085	
	Na			Daytime Telephor	ne Number
Enclose	ed is a check for	the following amount:			
]\$125.0·	0 Filing Fee [	\$130.00 Filing Fee & Certificate of Status	Certifi Certifi	00 Filing Fee & ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New Divis P.O.	ing Address Filing Section sion of Corporations Box 6327 thassee, FL 32314		Street Address New Filing Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	ter Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited Liability	Company is:				
				c	<u> </u>
A & G Modifications	L.L.C.			73.1	3
(Must end w	ith the words "Limited	l Liability Comp	any, "L.L.C.," or "LLC.")	S. 1.	- <del></del> ,
				70 T	1
ARTICLE II - Address:		66 C.A T.S		r.,	Ď
The mailing address and street ad-	dress of the principal of	office of the Limi	ited Liability Company is:	71 Cr	<u> </u>
<u>Principa</u>	l Office Address:		Mailing Address:		Ph 12: 15
584 Silvergate Loop			84 Silvergate Loop		-
Lake Mary			ake Mary		_
Florida 32746		<u>F</u>	Florida 32746		_
The name and the Florida street a	ddress of the registered  Ryan Whelan				
		Name			
	584 Silvergate Loop		2000000 200		
	Florida street addres	s (P.O. Box NO	T acceptable)		
	Lake Mary	FL	32746		
	City	State	Zip		
Having been named as registered a place designated in this certificate, i further agree to comply with the pro am familiar with and accept the obl	I hereby accept the app ovisions of all statutes r igations of my position	ointment as regi. elating to the pro as registered ag	stered agent and agree to act in this oper Ad complete performance of t ent as provided for in Chapter 605, gnature (REQUIRED)	s capacity ny duties,	). I

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Title:	Name and Address:	트, 등
"AMBR" = Authorized Member	<u> </u>	menun t
"MGR" = Manager		3: -
AMBR	Carol Whelan	(77) ·
<del>-</del>	192 N. Brooks Circle	- 3
	Oak Hill FL 32759	<u> </u>
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EV: Effective date, if other than the cective date is listed, the date must be of filing.)	date of filing: October 4, 2015 e specific and cannot be more than five busines	s days prior to or 90 d
ective date is listed, the date must be of filing.)	e specific and cannot be more than five busines not meet the applicable statutory filing requirement	s days prior to or 90 d
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