

L15000173087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 OCT -5 AM 9:29

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AND
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lutz Kitchen and Bath

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:

Matthew N. Lutz

Name of Person

Lutz Kitchen and Bath

Firm/Company

3701 NW 17th Lane

Address

Gainesville, FL 32605

City/State and Zip Code

mnlutz@gmail.com

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

For further information concerning this matter, please call:

Matthew N. Lutz

352

665-2138

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APPROVED
AND
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ARTICLE I - Name:

The name of the Limited Liability Company is:

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Lutz Kitchen and Bath LLC

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

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ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

3701 NW 17th Lane
Gainesville, FL
32605

3701 NW 17th Lane
Gainesville, FL
32605

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 is:

Matthew N. Lutz
Name

3701 NW 17th Lane
Florida street address (P.O. Box **NOT** acceptable)

Gainesville FL 32605
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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Matthew N. Lutz

MGR

Abram Wojcik

MGR

Paul Thomas

MGR

Name and Address:

Matt Lutz

3701 NW 17th Lane

Gainesville, FL 32605

Abram Wojcik

3701 NW 17th Lane

Gainesville, FL 32605

Paul Thomas

3701 NW 17th Lane

Gainesville, FL 32605

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TALLAHASSEE, FLORIDA

(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.)

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:

Matthew N. Lutz

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.

Matthew N. Lutz

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)