# 11500189378

(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

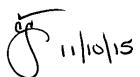
608-609-



900277697529

10/08/15--01011--028 \*\*160.00

15 NOV -4 PN 2: 46



## COVER LETTER

	gistration Section ision of Corporations	1
SUBJECT:	Jorge Morales Pool Service Name of Limited Liability Company	ce LL(
The enclosed A	d Articles of Organization and fee(s) are submitted for filing.	·
Please return al	all correspondence concerning this matter to the following:	
	Jorge Morales Name of Person	<del></del>
	Jorge Morales Name of Person  Jorge Morales Pool Servi Firm/Company	ce LL(
/4	1457 Lake Shore D.r. Address	
<u> </u>	Casselberry Florida 3  City/State and Zip Code  Jorge Morales 010 @ G Mail. CO  Be-mail address: (to be used for future annual report notification)	2707 <u>w</u>
	formation concerning this matter, please call:	
	Tora e Morde at (321) 279.5395  Name of Person Area Code Daytime Telephone Number	
Enclosed is a cl	a check for the following amount: ing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee	÷,
	Certificate of Status Certified Copy Certificate of Statu  (additional copy is enclosed) Certified Copy  (additional copy is en	
	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	15 NOV -4 PH



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 15, 2015

JORGE MORALES 1457 LAKE SHORE DRIVE CASSELBERRY, FL 32707

SUBJECT: JORGE MORALES POOL SERVICE LLC

Ref. Number: W15000068604

We have received your document for JORGE MORALES POOL SERVICE LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The designation of the registered agent must be at a Florida street address.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 215A000218862

₹ ?:

## EFFECTIVE DATE OI OI 110

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILE

	AF	T	ЮI	$\mathbf{E}$	[ - ]	Name:
--	----	---	----	--------------	-------	-------

The name of the Limited Liability Company is:

15 NOV -4 PM 2: 46

Jorge Morales Pool Service HASSEE, ELORIDA

(Mustand 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:	١,
1457 Lake Shore Dr.	1457 Lake Shore 16	٦6٠.
Casselberry	Casselberry	
1-101-1010	F101, 016	

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:

Tarae	10.4	orales
1457	ame	Shore Or
Florida street address (P	O. Box <u>NOT</u> acceptal Florida	
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)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Jorge Morales
MGR	Cacselberry Florida
(Use attachment if necessary)	
e date of filing.)	meet the applicable statutory filing requirements, this date will not be listed as
RTICLE VI: Other provisions, if any.	nane

**REOUIRED SIGNATURE:** 

Signature of a member or a 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.

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)

Page 2 of 2