## L1 5000200674

(Re	equestor's Name)	
(Ac	dress)	
(Ac	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

DEC - 4 2015

T. SCOTT



900279068839

11/19/15--01022--007 \*\*130.00

15 NOV 16 AH 9: 49

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Finchs Maintenance & Repairs "UC" 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:
Name of Person
Finch's Maintenance & Repairs "LC"
Idle Nebraska Ave Address
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{Certificate of Status} \text{S130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Finchs Maintenance &	Rapairs "LLC"
(Must end with the words "Limited Liability	ty 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
Principal Office Address:	Mailing Address:
Principal Office Address:	Mailing Address:
•	
100 Nobraska Ava	Ide Nebraska Ave

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

The name and the Florida street address of the registered agent are:

another business entity with an active Florida registration.)

ARTICLE I - Name:

The name of the Limited Liability Company is:

Kyle Finch
Name

IDLO Nebraska Aug Florida street address (P.O. Box NOT acceptable)

Ft Walton Brach FL 32548

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

12 MOV 19 MM G: L.S

litle:	uthorized Member	Name and Address:
AGR" = Mar	<u>ager</u>	
AMB	12	Myle Finch
		Ft Walton Bch FL 32548
V: Effective		of filing: 11-17-15 (OPTIONAL)
V: Effective tive date is li filing.) ne date inserte	date, if other than the date of sted, the date must be spe	cific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not
V: Effective tive date is li filing.) ne date inserte ent's effective	date, if other than the date of sted, the date must be speed in this block does not m	cific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not
V: Effective tive date is li filing.) ne date inserte ent's effective VI: Other pro	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of	cific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not
V: Effective tive date is li filing.) ne date inserte ent's effective VI: Other pro	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of ovisions, if any.	cific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not
V: Effective tive date is li filing.) ne date inserte ent's effective VI: Other pro	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of ovisions, if any.  Signature of a met This document is executed.	eet the applicable statutory filing requirements, this date will not if State's records.  The state of a member or an authorized representative of a member.  The state of a member of a member.  The state of a member of a m
V: Effective tive date is li filing.) ne date inserte ent's effective VI: Other pro	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of ovisions, if any.  Signature of a met This document is executed I am aware that any false	eet the applicable statutory filing requirements, this date will not of State's records.  There or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
V: Effective tive date is li filing.) ne date inserte ent's effective VI: Other pro	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of ovisions, if any.  Signature of a met This document is executed I am aware that any false	eet the applicable statutory filing requirements, this date will not of State's records.  The results of a member of a member of a member of a mattherized representative of a member of a
V: Effective tive date is li filing.) he date inserte ent's effective VI: Other pro	date, if other than the date of sted, the date must be speed in this block does not me date on the Department of ovisions, if any.  Signature of a met This document is executed I am aware that any false	eet the applicable statutory filing requirements, this date will not of State's records.  There or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.