L1600012541

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

Office Use Only

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T. SCOTT



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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 23, 2015

ANTHONY J SMITH 9024 S.W. 104TH TERRACE GAINESVILLE, FL 32608

SUBJECT: A&R PAINT & PRESSURE WASHING LLC

Ref. Number: W15000082124

We have received your document for A&R PAINT & PRESSURE WASHING LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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 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.

Tyrone Scott Regulatory Specialist II

Letter Number: 915A00026884

COVER LETŢER

Division of	Corporations		
SUBJECT: A&R P	aint & Pressure Washing L Name of Lin	LC nited Liability Company	······································
The enclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please return all corre	espondence concerning this m	atter to the following:	
Anthony	J Smith	Name of Person	
		· · · · · · · · · · · · · · · · · · ·	
		Firm/Company	
9024 s	w. 104th Terrence	Address	
		Address	
Gainsvill	e, FL 32608 (City/State and Zip Code	
smianth519@g	mail.com E-mail address: (to be use	d for future annual report notifica	ation)
For further information	on concerning this matter, plea	ase call:	
Anthony J Smith	at (_		
Nar	ne of Person	Area Code Daytime Te	lephone Number
Enclosed is a check for	or 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)

TO:

Registration Section

Mailing Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLÖRIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:		
A&R Paint & Pressure Washir	ig LLC	Liability Company, "L.L.C.," or "LL	C")
,	in the words Emitted	Liability Company, L.L.C., or LL	C.)
ARTICLE II - Address: The mailing address and street ad	dress of the principal of	fice of the Limited Liability Compan	y is:
Principal Office Address:		Mailing Address:	
9024 s. w. 104th Terrence		9024 s. w. 104th Terrence	
Sainsville , FL 32608	.	Gainsville , FL 32608	
The name and the Florida street a	· ·	agent are:	
9024 s. v	v. 104th Terrence		
	treet address (P.O. Box	NOT acceptable)	
Gainsvill		FL 32608	
	City	Zip	
the place designated in this ce capacity. I further agree to com of my duties, and I am familiar	rtificate, I hereby accept ply with the provisions o with and accept the obl	vice of process for the above stated lit the appointment as registered agent of all statutes relating to the proper an igations of my position as registered a er 605, F.S	and agree to act in this and complete performance

(CONTINUED)

Page 1 of 2

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08
(OPTIONAL) five business days prior to or
entative of a member. the execution of this document a facts stated herein are true, to the Department of State S.S.)
s, i the nt i

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)