

LI 00000 44811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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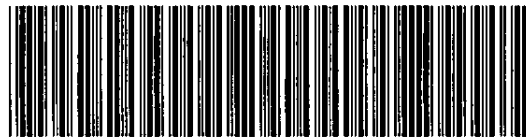
(Business Entity Name)

(Document Number)

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3/7/16

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Palm Coast Pro Services L.L.C.
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:

Kent Gavel
Name of Person
Palm Coast Pro Services
Firm/Company
1923 Glen Echo Ln
Address
Clearwater, FL 33760
City/State and Zip Code
kentgavel.ccc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kent Gavel 727 432-2594
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

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TALLAHASSEE, FL
DIVISION OF CORPORATIONS

EFFECTIVE DATE 02/24/16

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Palm Coast Pro Services L.L.C.

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

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31. ITCS STATE
HALL ARABIA FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

1923 Glen Echo Ln Clearwater, FL 33760

Mailing Address:

1923 Glen Echo Ln Clearwater, FL 33760

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:

Kent Gavel

Name

1923 Glen Echo Ln, Clearwater, FL 33760

Florida street address (P.O. Box **NOT** acceptable)

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..

Kent Gavel 2/24/16
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Manager

Clearwatwer, Fl. 33760

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA