

L16 DUUU 81102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

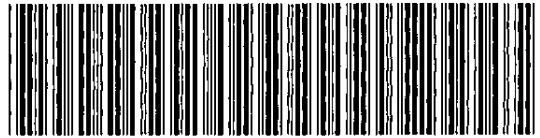
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Office Use Only

APR 27 2016

T. SCOTT



800283211828

03/22/16--01018--002 **160.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 APR 26 AM 10:06



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2016

LARRY MOORE
1116 DUNAD AVE
OPA-LOCKA, FL 33054

SUBJECT: A MOE & HEN AUTO TOWING & RECOVERY LLC.
Ref. Number: W16000023159

We have received your document for A MOE & HEN AUTO TOWING & RECOVERY 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):

Remove symbol from name and member must sign.,

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: 316A00006422

RECEIVED
16 APR 26 AM 8:07
SECRETARY OF STATE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: A Moe and Hen Auto Towing and Recovery LLC,
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:

Larry Moore

Name of Person

A Moe and Hen Auto Towing and Recovery LLC,

Firm/Company

1116 Dunad Ave

Address

Opa-Locka Florida, 33054

City/State and Zip Code

larrymoore681@gmail.com

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

For further information concerning this matter, please call:

Larry Moore

786

897-2317

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

A Moe and Hen Auto Towing and Recovery LLC,

(Must end 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:

1116 Dunad Ave

Opa-Locka

Florida, 33054

Mailing Address:

1116 Dunad Ave

Opa-Locka

Florida, 33054

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:

Larry Moore

Name

1116 Dunad Ave

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

Opa-Locka

City

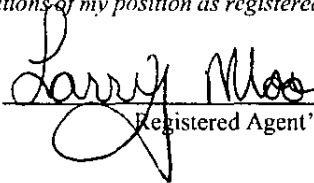
Florida

State

33054

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)

16 APR 26 AM 10:06

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Juliet Hendricks

1700 NW 46th Ave Apt-49

Lauderhill Florida, 33313

MGR

Larry Moore

1116 Dunad Ave

Opa-Locka Florida, 33054

(Use attachment if necessary)

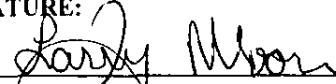
ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(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:



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.

Larry Moore

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)