## L16000092862

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## COVER LETTER

	egistration Section ivision of Corporations	· · · · · · · · · · · · · · · · · · ·
SUBJECT	:Total Comfort Sol Name of L	ar LLC imited Liability Company
	ed Articles of Organization and fee(s) are all correspondence concerning this r	· ·
. 10000 10101	Horace Smith, Jr	•
	· · · · · · · · · · · · · · · · · · ·	Name of Person
	Smith Bigman Bro	
		Firm/Company
	P.O. Drawer 1520	0
		Address
	Daytona Beach, F	lorida_32115
		City/State and Zip Code
-	hsmith@daytonala	
	E-mail address: (to be use	d for future annual report notification)
For further in	formation concerning this matter, plea	se call:
_	Horace Smith, Jr at(	386 ) 254-6875
		Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:	
]\$125.00 Fil	ing Fee x \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address
	New Filing Section Division of Corporations	New Filing Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

HORACE SMITH, JR., F.A.
JEFFREY F. BIGMAN
JEFFREY F. BROCK
AMANDA JACOBSEN BOWMAN
SARAH L. MORRISON METZ
SHEILA M. ENNIS
RUDDLEDGE H.C. SMITH
BROOKE M. GAFFNEY
FRANK S. GANZ

Of Counsel: LARRY R. STOUT



444 SEABREEZE BOULEVARD SUITE 900 DAYTONA BEACH, FL 32118

Send all correspondence to: POST OFFICE BOX 15200 DAYTONA BEACH, FL 32115

TELEPHONE: (386) 254-6875 FACSIMILE: (386) 257-1834

www.daytonalaw.com

May 10, 2016

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Attn: Tyrone

RE: Total Comfort Solar LLC Document # W16000026355

Dear Sir:

On March 31, 2016, a Registration form, Articles of Organization for Florida Limited Liability Company along with our check in the amount of \$130.00 was forwarded to the Division of Corporations. Then April 9, 2016, Sunbiz listed a document number and that the status was active, yet the document was rejected. After calling the Division of Corporations I learned that the form had been mailed backed as a signature was needed on page 2 of the Articles of Organization for Florida Limited Liability Company. As of May 10, 2016, I have not received the form, therefore, enclosed find a copy of the form submitted on March 31, 2016, along with my signature on page 2 of the Articles of Organization in order to open or assign an active document number.

Should you need anything further please do not hesitate to contact me.

Very truly yours,

HORACE SMITH, JR., P.A.

HSJR/jk/enc

MAY 13 PN 12: 29

## **COVER LETTER**

TO: Registration Section

**Division of Corporations** 

COPY

SUBJECT: _	Total Comfort Solar LLC
	Name of Limited Liability Company
The enclosed	Articles of Organization and fee(s) are submitted for filing.
Please return a	all correspondence concerning this matter to the following:
	Horace Smith, Jr
·	Name of Person
•	Smith Bigman Brock
,—	Firm/Company
	P.O. Drawer 15200
	Address
	Daytona Beach, Florida 32115
·	City/State and Zip Code
	hsmith@daytonalaw.com
	E-mail address: (to be used for future annual report notification)
For further info	rmation concerning this matter, please call:
· H	orace Smith, Jr at 386 254-6875
<del>-</del> ·	Name of Person Area Code Daytime Telephone Number
Enclosed is a	check for the following amount:
\$125.00 Filin	g Fee x \$130.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) 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

À	RI	ГΤ	cr	Æ.	T.	- N	Ĭя	me:

The name of the Limited Liability Company is:

•	COPF

<u> Total Comfort Solar LLC</u>	<u> </u>	
(Must end with the words "Limited Liabi	lity 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:

400 N US Hwy 1	400 N US Hwy 1
Ormond Beach, FL 32174	Ormond Beach, FL 32174

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:

Horace Smith, Jr 444 Seabreeze Blvd., Suite 900 Florida street address (P.O. Box NOT acceptable) Daytona Beach, Florida

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

Daniel P. Hucks  MGR  DeLeon Springs, Florida 32130  Lynda M. Hucks  #920 State Road 11  DeLeon Springs, Florida 32130  (Use attachment if necessary)  LEV: Effective date, if other than the date of filing:	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
Lynda M. Hucks  # 920 State Road 11  DeLeon Springs, Florida 32130  (Use attachment if necessary)  LEV: Effective date, if other than the date of filing:	•	
Lynda M. Hucks  # 920 State Road 11  DeLeon Springs, Florida 32130  (Use attachment if necessary)  LEV: Effective date, if other than the date of filing:		
Lynda M. Hucks  MGR   2920 State Road 11  DeLeon Springs, Florida 32130  (Use attachment if necessary)  LE V: Effective date, if other than the date of filing:	Daniel P. Hucks	4920 State Road 11
(Use attachment if necessary)  LE V: Effective date, if other than the date of filing: Date of filing (OPTIONAL) fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no ament's effective date on the Department of State's records.  LE VI: Other provisions, if any.	MGR	DeLeon Springs, Florida 32130
(Use attachment if necessary)  LE V: Effective date, if other than the date of filing: Date of filing (OPTIONAL) fective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not meent's effective date on the Department of State's records.  LE VI: Other provisions, if any.	Lynda M. Hucks	
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Page 2 of 2

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)