

L16000126742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

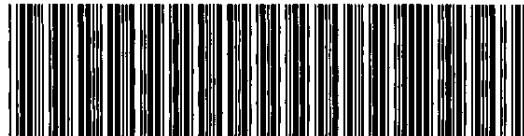
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

<06057>

Office Use Only



700285681897

05/31/16--01023--027 **185.00

05/31/16 11:04:51

EFFECTIVE DATE 07/16/16

N16-040914

07/11/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2016

DAVID STAHLMAN
1366 CHESAPEAKE AVE.
NAPLES, FL 34102

SUBJECT: STAHLMAN HOME WATCH SERVICES LLC
Ref. Number: W16000040914

PM
- Simbiz.org
- file LLC
- member name
- send letter for refund
- LLC co-form
and send

We have received your document for STAHLMAN HOME WATCH SERVICES LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not allow a sole proprietorship to file a conversion. A sole proprietorship is a business owned and operated by one individual. As a sole proprietor, the one individual owner is responsible for making all of the business decisions and all of the debts of the business are considered to be the debts of the one individual owner, as well. The sole proprietorship may or may not conduct business under the one individual owner's legal name. Because the business and the individual are considered as one organization and need each other to co-exist from a legal perspective, a sole proprietorship is not considered a business entity and cannot, therefore, file a conversion under Florida law.

If your sole proprietorship is actually owned and operated by two or more individuals and those individuals serve in the capacity of a partner, your business may not be a sole proprietorship. Your business may meet the definition of a partnership in accordance with Chapter 620, Florida Statutes. Chapter 620, Florida Statutes, allows a partnership to file a conversion. However, the partnership must first file a statement of registration in accordance with section 620.8105, Florida Statutes.

We are enclosing a statement of registration should your business entity meet the criteria of a partnership and you wish to proceed with the conversion. Please note the fee to register a partnership is \$50. To proceed with the conversion, please correct your conversion documents to reflect your current business entity is a partnership and resubmit the conversion documents along with the enclosed registration statement and an additional fee of \$50.

This office strongly suggests that you seek legal advice concerning this matter.

If you have any further questions concerning your document, please call (850) 245-6052.

RECEIVED
16 JUL 11 PM 2:28
TALLAHASSEE, FLORIDA

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 916A00011807

To Florida Department of State,

I miss understood the paper work to start an LLC company.
I have an Active Home Watch / Pressure Wash sole propriety
company, which I wanted to convert into an LLC company.
Now that I understand you can not do that Legally.
I am cancelling my original company, and have
mailed off appropriate paper work attached to this
letter to start my LLC company. STAHLMAN
Home Services LLC

Please send back my refund of \$185.00 which
I paid for the "Article of conversation for other business entity"
into Florid LLC company.

Attached is the letter confirming that I paid \$185.00
through a money order. After calling (850) 245-6052
the lady to me I had to write this letter for my
refund.

Thank you,

David Stahlman

1366 Chesapeake
Ave.
Naples, FL. 34102
dstahlman22@yahoo.
com
(239) 384-1012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stahlman Home Services 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:

David Stahlman
Name of Person

Stahlman Home Services LLC.
Firm/Company

1366 Chesapeake Ave.
Address

Naples, FL. 34102
City/State and Zip Code

dStahlman22@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Stahlman at (239) 384-1012
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:

Stahlman Home Services 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:

13666 Chesapeake Ave.
Naples, FL. 34102

Mailing Address:

13666 Chesapeake Ave.
Naples, FL. 34102

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:

David Stahlman
Name
13666 Chesapeake Ave.
Florida street address (P.O. Box **NOT** acceptable)
Naples FL. 34102
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..

David Stahlman
Registered Agent's Signature (REQUIRED)

(CONTINUED)

15
11 PM 2:56

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

David Stahlman
1366 Chesapeake Ave.
Naples FL 34102

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: July 16, 2016 (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:

David Stahlman

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.

David Stahlman

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)