

L16000162544

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DEPARTMENT OF REVENUE

9/1/14

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 249668 8103802

AUTHORIZATION :

*Spencer Coleman*

COST LIMIT : \$ 125.00

ORDER DATE : August 10, 2016

ORDER TIME : 9:53 AM

ORDER NO. : 249668-005

CUSTOMER NO: 8103802

DOMESTIC FILING

NAME: ABLE HOME WATCH & HANDYMAN  
SERVICES, LLC.

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT.

EXAMINER'S INITIALS: \_\_\_\_\_

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16 AUG 18 AM 8:17

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ABLE HomeWatch & Handyman Service, 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:

Shawn C. Munson  
Name of Person

ABLE Home Watch & ~~Service~~ Handyman Service, LLC  
Firm/Company

7826 Bristol CR  
Address

Naples, FL, 34120  
City/State and Zip Code

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

For further information concerning this matter, please call:

Shawn Munson at 407 408-1130  
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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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

249668

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16 AUG 18 AM 8:17

August 18, 2016

CORPORATION SERVICE COMPANY

**RESUBMIT**

Please give original  
submission date as file date.

SUBJECT: ABLE HOME WATCH & HANDYMAN SERVICES, INC.  
Ref. Number: W16000057508

We have received your document for ABLE HOME WATCH & HANDYMAN SERVICES, INC. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 416A00017530

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16 AUG 31 AM 10:53  
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TO AVOID ALLEGED  
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EFFECTIVE DATE 09/15/10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ABLE Home Watch & Handyman Service, 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:

7826 BRISTOL CK  
NAPLES, FL 34120

Mailing Address:

7826 BRISTOL CK  
NAPLES, FL 34120

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:

Corporation Service Company  
Name

1201 Hays St.  
Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32301  
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.

M. Zender Melissa Zender  
Registered Agent's Signature (REQUIRED) Asst. Vice President

(CONTINUED)

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16 AUG 18 AM 8:17

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

AMBR

**Name and Address:**

Shawn C Munsen  
7826 Bristol Ct  
Naples, FL 34120

Nino C. Munsen  
7826 Bristol Ct  
Naples, FL 34120

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 9/15/2016 (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:**



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.

Shawn C. Munsen

Typed or printed name of signer

**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)

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