

L16000183455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

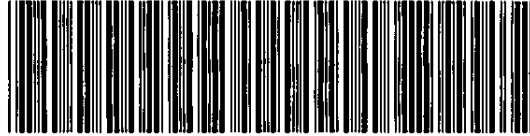
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 31, 2016

HEARLOW FRANCIS
3131 PULLMAN CAR DR
VALRICO, FL 33594

SUBJECT: FREWILL SERVICES LLC
Ref. Number: W16000060454

We have received your document for FREWILL SERVICES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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.

Matthew T Moon
Regulatory Specialist II

Letter Number: 316A00018616

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Hearlow Francis

3131 Pullman Car Drive Apt 101

Valrico, Florida 33594

407-982-0744

Hearlow.francis@outlook.com

September 19, 2016

Mathew Moon

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

Dear Mathew Moon:

This letter is requesting an acceptance of the following enclosed article for business registration Frewill Services LLC. I called several times and left a voicemail requesting a dialogue with no response or received a return mail requesting correction/s; apparently there is a reason for the rejection, missing signature.

Please accept the enclosed form as a replacement to expedite the enrollment process.

Thanks for your help.

Frewill Services LLC.

Hearlow Francis

3131 Pullman Car Dr Apt 101

Valrico, Florida 33594

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FREWILL SERVICES

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:

Hearlow Francis

Name of Person

Frewill Services

Firm/Company

3131 Pullman Car Drive

Address

Valrico, Florida 33594

City/State and Zip Code

hearlow.francis@outlook.com

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

For further information concerning this matter, please call:

Hearlow Francis

407

982-0744

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, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Frewill 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:

3131 Pullman Car Drive Apt 101
Valrico, Florida, 33594

Mailing Address:

3131 Pullman Car Drive Apt 101
Valrico, Florida, 33594

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:

Shatala Francis

Name

3131 Pullman Car Drive

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

Valrico, Florida, 33594

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

Name and Address:

Hearlow Francis

3131 Pullman Car Drive Apt 101

Valrico, Florida, 33594

(Use attachment if necessary)

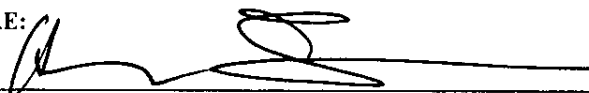
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

Hearlow Francis

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)

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