## L16000210445

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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11/18/16

## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Craig Cook Painting LiLiC  Name of Limited Liability Company
y Name of Billing Blacking Company
The enclosed Articles of Organization and fce(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
William Craig Cook  Name of Person
Name of Person
Cook Painting
Firm/Company
2208 old Bainbridge Road
Address
Tallahussee FC 32303
City/State and Zip Code
-mail audress: (to be used for future annual report notification)
For further information concerning this matter, please call:
William Cruing Cook at 050, 544-8084
Name of Person Area Code Daytime Telephone Number
England in the Land Control of the C
Enclosed is a check for the following amount:
\$125.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee,  Certificate of Status (additional copy is enclosed)  Certified Copy  (additional copy is enclosed)
Mailing Address  New Filing Section  New Filing Section

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 323 14

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:	
(Must end with the words "Limited Liability Co	ompany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the I	Limited Liability Company is:
Principal Office Address:	Mailing Address:
7208 old Bainbridge Road Turiahussec, FC 32303	Same 3
ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.)	ed Agent's Signature: Agent. You must designate an individual or
The name and the Florida street address of the registered agent are:  William Cva  Name	is Cook
2208 OIL Bain Florida street address (P.O. Box	bridge Road
Tellahussee FC	32303
Tullahussee FC	Zip
Having been named as régistered agent and to accept service of procesoface designated in this certificate, I hereby accept the appointment as further agree to comply with the provisions of all statutes rélating to the am jamiliar with and accept the obligations of my position as registere	registered agent and agree to act in this capacity. I se proper and complete performance of my duties, and l
William	rung Cook
Registered Agent	's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

.•	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
٠	AMBR	William Cruis Cook 2208 Old Buinhvidge Road
		Taillahasser, FC 32303
•		
	(Use attachment if necessary)	
(If an e the dat <u>Note:</u>	effective date is listed, the date must be sp te of filing.)	e of filing: Nov. 18, 2016. (OPTIONAL) sectific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as of State's records.
ARTIC	CLE VI: Other provisions, if any.	
<del></del>		
	· · · · · · · · · · · · · · · · · · ·	
	REQUIRED SIGNATURE:	lia Crei Cook
	This document is exect lam aware that any fall	nember or an authorized representative of a member.  uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.

Villium Cruis Cook
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)

ARTICLE IY-

\$ 5.00 Certificate of Status (Optional)

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