L17000043427

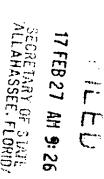
(Re	equestor's Name)	
(Ad	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600296027566

02/27/17--01021--018 **160.00



FEB 2.8 2017 K. Brumbley

COVER LETTER

Registration Section

TO:

Division of Corporations		
SUBJECT: Timberwolf Home Improvements 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:		
Scott Randall Gendusa		
Name of Person		
Timberwolf Home Improvements LLC		
Firm/Company		
2457 Royal Pointe Dr. Address		
. 1444-000		
Green Cove Springs, FL 32043 City/State and Zip Code		
timbrwif58@gmail.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Scott Randall Gendusa at (631) 618 · 5084 Name of Person Area Code Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{Certificate of Status}\$\$ Certificate of Status \$\times \text{Certified Copy} \\ (additional copy is enclosed)\$\$ Certified Copy \\ (additional copy is enclosed)\$\$ (additional copy is enclosed)\$\$		
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Mailing Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

bility Company, "L.L.C.," or "LLC.")
e of the Limited Liability Company is:
Mailing Address:
2457 Royal Pointe Dr. Green Cove Springs, FL 32043
tegistered Agent's Signature: gistered Agent. You must designate an individual or
ent are:
OT acceptable)
FL 32043
Zip
e of process for the above stated limited liability company at appointment as registered agent and agree to act in this ll statutes relating to the proper and complete performance tions of my position as registered agent as provided for in 605, F.S

(CONTINUED)

Page 1 of 2

17 FEB 27 AM 9: 26
SECRETARY OF STAIL
AND ANY SEFF FLORID

AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	
MGR - Manager	Scott Randall Gendusa
141-01-1	2457 Royal Pointe Dr.
	Green Cove Springs, FL 32043
xxM2Title*	xxM2Name*
	xxM2PhysAdd1*
	xxM2PhysAdd2*
xxM3Title*	xxM3Name*
	xxM3PhysAdd1*
	xxM3PhysAdd2*
xxM4Title*	xxM4Name*
	xxM4PhysAdd1*
	xxM4PhysAdd2*
Use attachment if necessary)	
THE PROPERTY OF THE PARTY OF THE PARTY.	ne date of filing: $\frac{2}{2}$
	ne date of filing: (OPTIONAL)
v: Effective date, if other than the	the specific and county he many than this hydrony days prior to as o
tive date is listed, the date musi	be specific and cannot be more than five business days prior to or S
tive date is listed, the date must filing.)	t be specific and cannot be moré than five business days prior to or 9
cave date is listed, the date must filling.)	t be specific and cannot be moré than five business days prior to or S
dive date is listed, the date must filing.)	be specific and cannot be moré than five business days prior to or 9
rave date is listed, the date must filling.) VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 9
f filing.) EVI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 9
filing.) VI: Other provisions, if any. EEOUIRED SIGNATURE:	to be specific and cannot be more than five business days prior to or s
Course is listed, the date must filling.) VI: Other provisions, if any. REOUIRED SIGNATURE:	To expecting and cannot be more than five business days prior to or s
REQUIRED SIGNATURE: Signature of (In accordance with section)	f a member or an authorized representative of a member. tion 605.0203 (1) (b), Florida Statutes, the execution of this document
REQUIRED SIGNATURE: Signature of (In accordance with sect constitutes an affirmatio	of a member or an authorized representative of a member. tion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true.
REQUIRED SIGNATURE: Signature of (In accordance with sect constitutes an affirmation I am aware that any false)	of a member or an authorized representative of a member. tion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. te information submitted in a document to the Department of State
REOUIRED SIGNATURE: Signature o (In accordance with sect constitutes an affirmatio I am aware that any false	of a member or an authorized representative of a member. tion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true.
REQUIRED SIGNATURE: Signature of (In accordance with sect constitutes an affirmation I am aware that any false constitutes a third degree	of a member or an authorized representative of a member. tion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true, in information submitted in a document to the Department of State

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 (Co.)

\$ 5.00 Certificate of Status (Optional)

Timberwolf Home Improvements LLC 2457 Royal Pointe Dr. Green Cove Springs, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of Timberwolf Home Improvements LLC:

Scott Randall Gendusa 2457 Royal Pointe Dr. Green Cove Springs, FL 32043

Scott Randall Gendusa, Organizer

2/23/17