L17000/02366

(Re	questor's Name)	
(Ad	dress)	
(Ād	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300298981423

05/10/17--01021--003 **160.00

RECEIVED

MINIO MINIO

SEUTE INITIALIS

17 MAY 10 PM 9: 25

COVER LETTER

TO: New Filing Section
Division of Corporations
SUBJECT: Fryson Retrat Design + Remodel 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:
Andrew Mores Fryson Jr. Name of Person
Name of Person
Fryson Rehab Design & Remodel Firm/Company
ritin/Company ·
1875 MC King Blvd
Address /
Midway, IC 32343 City/State and Zip Code afyson 356) yahoo.com E-mail address: (to be used for future annual report notification)
City/State and Zip Code
· afyson 35@ yahov.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (850) 491-7421 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 (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

A.	ĸ	ΓĮ	C.	LE	I -	N	a	m	e	•

The name of the Limited Liability Company is:

Trison Retains Design + Remode LLC
(Must contain 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:

1875 MLKing Blyd 1875 MLKing Blyd	
Midway FC 32 343 Midway FC 32343	

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:

Andrew Inspect
Name

1875 ML K Blud

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

Midway FL 32343

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)

SECULIARY OF BIANTON SECULIARY OF BIANTON OF

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Andrew Fyson 1875 MC king Tolvid Midway, FK 32343
MGR/padner hille	Lataya Fryson 1875 LLC King Blvd Midway, FC 33343
(Use attachment if necessary)	
the date of filing.)	and cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed a
ARTICLE VI: Other provisions, if any.	s records.
REOUIRED SIGNATURE:	
This document is executed in ac I am aware that any fake inform	ran authorized representative of a member, ecordance with section 605.0203 (1) (b), Florida Statutes, lation submitted in a document to the Department of State as provided for in s.817.155, F.S.
Vandre	d or printed pame of signee

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)