LIT 000 201 199

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

Office Use Only



500303575085

09/27/17--01018--005 **180.00

D O'KEEFE SEP 28 2017

COVER LETTER

	New Filing Section Division of Corporations
SUBJEC	H & S Truck And Auto Parts House, L.L.C.
зовяне	Name of Limited Liability Company
The enclo	osed Articles of Organization and fee(s) are submitted for filing.
Please ret	turn all correspondence concerning this matter to the following:
	Janet Cumbaa Taylor
	Name of Person
	H & S Truck And Auto Parts House, L.L.C.
	Firm/Company
	19041 SR. 20 West
	Address
	Blountstown, Florida 32424
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Janet C. Taylor 850 674-8449
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
\$125.00	Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \tag{S155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
	M.:95 A.J.J

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

	o Parts House, L.L.C.		
(Must contain	n the words "Limited L	iability Company, "l	L.L.C.," or "LLC.")
TCLE II - Address:			
mailing address and street add	lress of the principal of	fice of the Limited I.	iability Company is:
<u>Principal</u>	Office Address:		Mailing Address:
18876 SR. 20 West		19041	SR. 20 West
Blountstown, Florida 3	32424	Bloun	tstown, Florida 32424
TCLE III - Registered Agen Limited Liability Company conter business entity with an act	annot serve as its own I	Registered Agent. Yo	's Signature: ou must designate an individual
Limited Liability Company c	annot serve as its own I tive Florida registration	Registered Agent. You.)	
Limited Liability Company c her business entity with an act	annot serve as its own I tive Florida registration	Registered Agent. You.)	
Limited Liability Company c her business entity with an act	annot serve as its own I tive Florida registration ldress of the registered	Registered Agent. You.)	
Limited Liability Company c her business entity with an act	annot serve as its own I tive Florida registration ldress of the registered	Registered Agent. You	
Limited Liability Company c her business entity with an act	annot serve as its own I tive Florida registration Idress of the registered Janet Cumbaa Taylor	Registered Agent. You,) agent are: Name	ou must designate an individual
Limited Liability Company c her business entity with an act	annot serve as its own I tive Florida registration Idress of the registered Janet Cumbaa Taylor 19041 SR. 20 West	Registered Agent. You,) agent are: Name	ou must designate an individual

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..

(CONTINUED)

Title: "AMBR" = Auth	Name and Address: orized Member	
"MGR" = Manag		
AMBR	Harry W. Cumbaa	
	19041 SR. 20 West	
	Blountstown, Florida 32424	
MGR	Janet C. Taylor	
	19041 SR. 20 West	
	Blountstown, Florida 32424	
		
(Use attachment	if necessary)	
ective date is list of filing.)	ate, if other than the date of filing: October 1, 2017 . (OPTIONAL ed, the date must be specific and cannot be more than five business days prior in this block does not meet the applicable statutory filing requirements, this date	to or 90 (
fective date is list of filing.) If the date inserted ment's effective	ed, the date must be specific and cannot be more than five business days prior in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records.	to or 90 (
fective date is list of filing.) If the date inserted	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records. isions, if any. GNATURE:	to or 90 (
ective date is list of filing.) If the date inserted ment's effective of the provential of the provent	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records.	to or 90 i
ective date is list of filing.) The date inserted ment's effective of the provential	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records. isions, if any. GNATURE: Signature of a member or an authorized representative of a member.	to or 90 (
ective date is list of filing.) The date inserted ment's effective of VI: Other prov	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records. isions, if any. GNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida:	e will not
ective date is list of filing.) The date inserted ment's effective of the provential	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records. isions, if any. GNATURE: Signature of a member or an authorized representative of a member.	e will not
ective date is list of filing.) The date inserted ment's effective of the provential	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records. isions, if any. GNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Floridal am aware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S. Janet Cumbaa Taylor	e will not
ective date is list of filing.) The date inserted ment's effective of the provential	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records. GNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida: I am aware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S.	e will not
fective date is list of filing.) If the date inserted ment's effective of the provential of the proven	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records. GNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida: I am aware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S. Janet Cumbaa Taylor Typed or printed name of signee Filing Frees:	e will not
fective date is list of filing.) If the date inserted ment's effective of the provential of the provential of the filing of the	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records. isions, if any. GNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida: a maware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S. Janet Cumbaa Taylor Typed or printed name of signee Filing Fees: Fee for Articles of Organization and Designation of Registered Agent	e will not
sective date is list of filing.) The date inserted ment's effective of the filing. E VI: Other proves the filing of the filing	in this block does not meet the applicable statutory filing requirements, this date date on the Department of State's records. GNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida: I am aware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S. Janet Cumbaa Taylor Typed or printed name of signee Filing Frees:	e will not

as

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

ARTICLE IV-