

L17000248746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

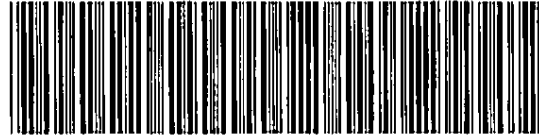
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/5/17
M. Perry



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 21, 2017

BRIAN C PRAY
13262 WEDGEFIELD DRIVE
NAPLES, FL 34110

SUBJECT: HOME WATCH ENTERPRISE LLC
Ref. Number: W17000092735

We have received your document for HOME WATCH ENTERPRISE LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Keyna E Page
Regulatory Specialist II

Letter Number: 817A00023584

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TALLAHASSEE, FLORIDA

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DIV OF CORP
REGISTRATION

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Home Watch Enterprise 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:

Brian C Pray

Name of Person

Home Watch Enterprise LLC

Firm/Company

13262 Wedgefield Drive

Address

Naples, FL 34110

City/State and Zip Code

bcpay@homewatchenterprise.com

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

For further information concerning this matter, please call:

Brian C Pray

239

249 1554

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
2601 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:

Home Watch Enterprise 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:

Principal Office Address:

Mailing Address:

13262 Wedgefield Drive

Same

Naples, FL 34110

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:

Brian C Pray

Name

13262 Wedgefield Drive

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

Naples

Florida

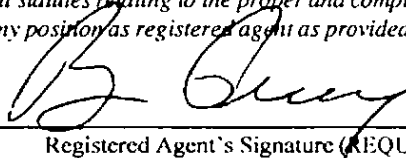
34110

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

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

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

Brian C Pray

13262 Wedgfield Drive

Naples, FL 34110

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1 January 2018. (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 Statute. I am aware that any false information submitted in a document to the Department of Social Services constitutes a third degree felony as provided for in s.817.155, F.S.

Brian C Prav

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)

SECRETARY OF STATE
TALLAHASSEE BUILDING OF STATE
TALLAHASSEE, FLORIDA

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