

L18000066145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

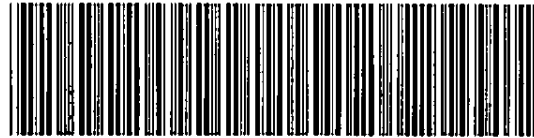
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/12/18--01040--004 **125.00

RECEIVED
18 MAR 12 AM 11:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 15 2018
C. KIRSCHE

COVER LETTER

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

SUBJECT: COOL NICK AIR CONDITIONING 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:

EMMANUELLE QUINLAN SAINTIL

Name of Person

QUINLAN ACCOUNTING, CONSULTING, AND TAXES LLC

Firm/Company

1461 WINDORAH WAY APT F

Address

ROYAL PALM BEACH, FL 33411

City/State and Zip Code

QUINLANACTLLC@GMAIL.COM

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

For further information concerning this matter, please call:

OGUENA P JACQUET 561 644-2490

Name of Person at () 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
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:

COOL NICK AIR CONDITIONING 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:

4816 POSEIDON PLACE
LAKE WORTH, FL 33463

Mailing Address:

4816 POSEIDON PLACE
LAKE WORTH, FL 33463

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:

NIXON JACQUET

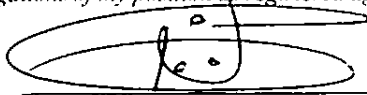
Name

4816 POSEIDON PLACE

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

<u>LAKE WORTH</u>	<u>FL</u>	<u>33463</u>
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)

11.11.11
18 MAR 12 AM 11:29
CLERK OF STATE
TALLAHASSEE, FL 32399

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

Name and Address:

NIXON JACQUET

4816 POSEIDON PLACE

LAKE WORTH, FL 33463

OGUENA P JACQUET

4816 POSEIDON PLACE

LAKE WORTH, FL 33463

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: MARCH 5, 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 Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

NIXON JACQUET

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)

3/6/2018

Gmail - Corporate Dissolution - P12000065762



EMMANUELLE SAINTIL <quinlanactllc@gmail.com>

Corporate Dissolution - P12000065762

1 message

OnlineWebEvent@dos.state.fl.us <OnlineWebEvent@dos.state.fl.us>
To: QUINLANACTLLC@gmail.com

Fri, Mar 2, 2018 at 3:30 AM

Re: Document Number P12000065762

The Articles of Dissolution dissolving COOL NICK AIR CONDITIONING INC., a Florida corporation, were filed on March 01, 2018.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Division of Corporations

U8000066145

Nixon Jacquet
Cool Nick Air Conditioning LLC
4816 Poseidon Place
Lake Worth, FL 33463
March 5, 2018

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

I am writing to inform that I do not intend to reopen Cool Nick Air Conditioning Inc. I am releasing the name to be used in Cool Nick Air Conditioning LLC formation.

Attached is a copy of the dissolution of the former corporation, Cool Nick Air Conditioning Inc.

Any question or concern, please do not hesitate to contact me at 561-248-8239 or Oguena P Jacquet at 561-644-2490.

Sincerely,

A handwritten signature in black ink, appearing to be "Nixon Jacquet", enclosed within a large, loopy oval scribble.

Nixon Jacquet
Member/Manager