

L18000101862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

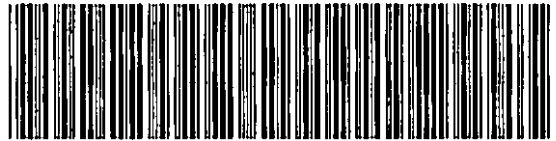
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TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: 9 Zero Pour, 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:

Bryan C. Goode III

Name of Person

Romanello Goode, PL

Firm/Company

320 1st Street North, Suite 613

Address

Jacksonville Beach, FL 32250

City/State and Zip Code

9zeropour@yahoo.com

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

For further information concerning this matter, please call:

Bryan Goode 904 2471755

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
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION
OF
9 ZERO POUR, LLC**

ARTICLE I - NAME

The name of the limited liability company is **9 Zero Pour, LLC**. ("Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1842 Coldfield Drive West
Jacksonville, FL 32246

Mailing Address:

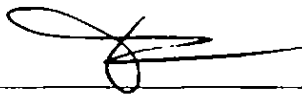
1842 Coldfield Drive West
Jacksonville, FL 32246

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Ted Ricks
1842 Coldfield Drive West
Jacksonville, FL 32246

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.



Ted Ricks

ARTICLE IV - MANAGERS OR AUTHORIZED MEMBERS

The name and address of each Manager or Authorized Member is as follows:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

Ed Joseph Mateo
12170 Guyton CT
Jacksonville, FL 32224

AMBR

Ted Ricks
1842 Coldfield Drive West
Jacksonville, FL 32246

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TALLAHASSEE, FLORIDA

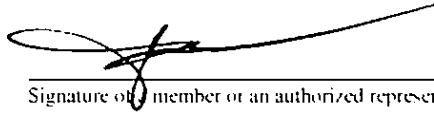
ARTICLE V - OTHER MATTERS

All members shall have preemptive rights with respect to any units by the company subsequent to the date on which such member purchased his or her units. The preemptive right of each individual member shall entitle such member to purchase a percentage of the units to be issued by the company such that his or her proportionate ownership interest in the company will remain the same.

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

The management of the Company is fully reserved to its Members in proportion to the Members' respective Percentage Interests; the Members shall have the sole and exclusive control of the management, business and affairs of the Company, and the Members shall make all decisions and take all actions for the Company. In exercising authority under these Articles or over the day-to-day operation of the Company's business, all actions taken on behalf of the Company by an Authorized Member shall require the prior approval of a majority (51%) of the Voting Membership Units in the Company held by the Voting Members.

REQUIRED SIGNATURE:



Signature of member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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.)

Ted Ricks

Typed or printed name of signee

18 APR 23 PM 3:34
FLORIDA
DEPARTMENT OF STATE