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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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T. SCOTT



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SECRETARY OF STATE

FILED

COVER LETTER

	New Filing Section Division of Corporations		
SUBJEC	Key West Roofing And Gener	al Contractor.	LLC.
SOBILO		of Limited Li	ability Company
The enclo	sed Articles of Organization and fo	ee(s) are submi	tted for filing.
Please ret	urn all correspondence concerning	this matter to	he following:
	Paul S. Mills, CPA		
		Nam	e of Person
	Paul S. Mills, CPA		
		Firm	/Company
	1541 Fifth Street		
	-	ار	ddress
	Key EWest, FL 33040		
		City/Stat	e and Zip Code
	pmillsepa@aol.com		tre annual report notification)
			ne annua report normeation)
For further	information concerning this matter	, please call:	
	Paul S Mills	305 at (294-3699
	Name of Person	Area Cod	
Enclosed	is a check for the following amoun	f·	
	Filing Fee S130.00 Filing Fe Certificate of Sta	ee & S1	55.00 Filing Fee & \$160.00 Filing Fee, rtified Copy tional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address
	New Filing Section Division of Corporations		New Filing Section
	P.O. Box 6327		Division of Corporations Clifton Building
	Tallahassee, FL 32314		2661 Executive Center Circle

Tallahassee, FL 32301

* ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam	e	:
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The name of the Limited Liability Company is:

Key West Roofing And General Contractor, 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	Addroses
I I I III LIDAL	(/)	Auul Coo.

Mailing Address:

c/o Paul S Mills, CPA	c/o Paul S. Mills, CPA
1541 Fifth Street	1541 Fifth Street
Key West, FL 33040	Key West, FL 33040

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:

Paul S Mills, CPA		
	Name	
1541 Fifth Street		
Florida street addr	ress (P.O. Box <u>NOT</u> ac	eceptable)
Key West	FL	33040
City	State	7in

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)

2010 MAY 15 AM 9-94 SECRETARY OF STATE

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Robert R. Chinnis Jr.
	c/o Paul S. Mills, CPA
	1541 Fifth Street, Key West, FL 33040
·	
	
(Use attachment if necessary)	
f an effective date is listed, the date must be spite date of filing.)	of filing: April 1, 2018 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed as of State's records.
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	W
This document is executed an aware that any false constitutes a third degree	ember or an authorized representative of a member, ted in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.
Robert	R. China: 5 Tr. Typed or printed name of signee
	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)