· L18000 139614

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(200000000)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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P.K. G. 1-1

COVER LETTER,

TO:	New Filing Section	•.	•					
	Division of Corporations							
SUBJE	Southern Renovations Oak I	Hill LLC						
	Name	of Limited Liabil	ity Company					
The end	closed Articles of Organization and fe	c(s) are submitted	for filing.					
Please r	eturn all correspondence concerning t	his matter to the	following:					
	Edward C Taylor							
	Name of Person							
Southern Renovations Oak Hill LLC								
	Firm/Company							
	216 Sargent Ave							
		Addı	ess					
	Oak Hill Florida 32759							
City/State and Zip Code								
southernrenovationsoakhill@gmail.com								
	E-mail address: (to be	e used for future	unnual report notification)					
For furthe	er information concerning this matter,	please call:						
	Edward Taylor	386	690-0957					
	Name of Person	Area Code	Daytime Telephone Number					
	d is a check for the following amount	•						
]\$ 125.00	Filing Fee \$130.00 Filing Fee Certificate of State		00 Filing Fee & S160.00 Filing Fee & Certificate of Status &	HVISION OF PRIVITE				
			al copy is enclosed) Certified Copy	95				
			(additional copy is \$600sed)	72				
			ENG. TO COM	: ; ;				
	Mailing Address		Street Address	⊊r				
	New Filing Section		New Filing Section 25 35 35 35	 				
	Division of Corporations		Division of Corporations					
	P.O. Box 6327		Clifton Building					
	Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301					

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Southern Renovations Oa	ik Hill LLC		
(Must conta	in the words "Limited Li	ability Company,	"L.L.C.," or "LLC.")
CLE II - Address:			
ailing address and street ad	dress of the principal offi	ice of the Limited	Liability Company is:
Principa	Principal Office Address:		Mailing Address:
216 Sargent Ave		216	Sargent Ave
Oak Hill FL 32759			
CLE III - Registered Age	cannot serve as its own R	Registered Age	nt's Signature: You must designate an individu
CLE III - Registered Ager	cannot serve as its own Retive Florida registration. ddress of the registered a	Registered Age degistered Agent.	nt's Signature:
CLE III - Registered Age imited Liability Company or business entity with an ac	cannot serve as its own Retive Florida registration. ddress of the registered a	Registered Age degistered Agent.	nt's Signature:
CLE III - Registered Age imited Liability Company or business entity with an ac	cannot serve as its own Retive Florida registration. ddress of the registered a	Registered Age egistered Agent.) gent are:	nt's Signature:
CLE III - Registered Age imited Liability Company or business entity with an ac	cannot serve as its own Retive Florida registration. ddress of the registered a Edward Taylor	Registered Age egistered Agent.) gent are:	nt's Signature: You must designate an individu
CLE III - Registered Age imited Liability Company or business entity with an ac	cannot serve as its own Retive Florida registration. ddress of the registered a Edward Taylor 216 Sargent Ave	Registered Age egistered Agent.) gent are:	nt's Signature: You must designate an individu

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..

Educerd C Taylon
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:					
"MGR" = Manager MGR	Edward C Taytor					
	216 Sargent Ave					
	Oak Hill FL 32759					
AMBR	Donna J Belt					
	919 Fairvilla Dr					
	New Smyrna Beach FL 32168					
····						
(Use attachment if necessary)						
ARTICLE V: Effective date, if other than the date of filing:	06/01/2018 (OPTIONAL)					
(If an effective date is listed, the date must be specific and	I cannot be more than five business days prior to or 90 days after					
the date of filing.)	reading be more than tive business days prior to or 70 days after					
	pplicable statutory filing requirements, this date will not be listed a					
the document's effective date on the Department of State's	· · · · · · · · · · · · · · · · · · ·					
·						
ARTICLE VI: Other provisions, if any.						
<u></u>						
DECLUDED CICNATUDE.						
REQUIRED SIGNATURE:						
Eduxon	2 C Taylor					
Signature of a member or	an authorized representative of a member					
	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.					
	tion submitted in a document to the Department of State					
constitutes a third degree felony a						

Edward C Taylor

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)

