# L18000236659

(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

N. SAMS OCT 15 2018



400319711004

400319711004 10/16/18--01001--014 \*\*130.00

2018 OCT 15 PH to 11

## COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: CARPENNY & HARDWARE SERVECES, 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:
JOSE GUILLEN
Name of Person
9413 Country Clar ON
2413 Country Club Dr Address
TRUMHASSEE, CL 22301
TANAHASSEE, FL 32301  City/State and Zip Code  Joseguiller 2010 eicloud. Com
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
JOSE GUILLEN at (317-) 517-1714
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Status S130.00 Filing Fee & Certificate of Status Certificate of Status (additional copy is enclosed)  \$160.00 Filing Fee. Certificate of Status & Certificate of Status & Certificate Opy (additional copy is enclosed)
Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassec, 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 - Nai	m	e:
-----------------	---	----

The name of the Limited Liability Company is:

CARPENTRY A HARDWARE SERVECES, ((C)
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

Mailing Address:

### ARTICLE II - Address:

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

Principal Office Address:

THILDHASSEE FO 32301 TALMHASSEE, FL 3230	) い	
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:	2018 OCT 15	
Name  2413 Cowary CLuß Dr  Florida street address (P.O. Box NOT acceptable)  TALVAHAS SEE, FI 32301	P	ה
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)

Title:	Name and Address:
"AMBR" = Authorized Member	1
"MGR" = Manager	JOSE GUILLEN
AMBR	2413 country club on
	7413 COM/109 CLM3
	TALLAHASSEE, FL 32301
	20
	ZOIÐ OCT
	A
	<u> </u>
	<u>ာ</u> င် ႏ
(Use attachment if necessary)	
	(OPTIONAL)
CLE V: Effective date, if other than the date	e of filing: (OPTIONAL)
effective date is listed, the date must be sp	pecific and cannot be more than five business days prior to or 90 days
e of filing.)	meet the applicable statutory filing requirements, this date will not be li-
cument's effective date on the Department	of State's records
dunent 8 effective date on the isoparanent	tot plate 3 records.
CLE 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 his document is executed in accordance with section 603.0203 (1) (6). Florida Statites. 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.

Typed or printed name of signee

9950 A. S.

### Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)