L18000258368

(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:		

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T. SCOTT



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ALI AHASSEE STORE



COVER LETTER

TO: New Filing Section Division of Corporations	\
SUBJECT: Bret HamiHor Handy man Serv. 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:	
,	
Bret Hamilton	
Name of Person	
$\alpha = \alpha = \alpha$	
1166 POPlar Dr. Address	
Address	
tallahassee F1 3BO4	
Tajella (Carpentry a) Cloud & Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Bret Hamilton 850, 322-9786	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	
Mailing Address Street Address	
New Filing Section New Filing Section	
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

The name of the Limited Liabili	ty Company is:		
13-01	Hamilton	Handyman	Serv. LLC

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

ARTICLE II - Address:

ARTICLE I - Name:

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

Principal Office Address:	Mailing Address:
1166 poplar Dr. +allahossee Fl. 32304	1166 poplar Dr +allahassee, Fl 32304

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.)

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 (REOUIRED)

(CONTINUED)

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·	authorized to manage and control the Limited Liability Company:
Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Bret Hamilton
	1166 poplar Dr. 32304
	tallahassee Fl.
	
	•
71.1 1 25° 3	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the d	ate of filing: 7/7/8 (OPTIONAL)
	specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	
	of meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Departme	ent of State's records.
ARTICLE VI: Other provisions, if any.	
DECHIDED CLOSS THE	
REQUIRED SIGNATURE:	· 11-1-
Brit. H	imelle
Signature of a	member or an authorized representative of a member.
	ecuted in accordance with section 605.0203 (1) (b). Florida Statutes.
	alse information submitted in a document to the Department of State gree felony as proyided for in s.817.155, F.S.
σ	
- Rut	Hamilto
	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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)