## 118000268550

(Requestor's Name)  (Address)  (Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

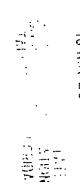
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## COVER LETTER

2.

TO: New Filing Section Division of Corporations
SUBJECT: ANTONIO TOITES Remodeling Services UC  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:
ANTONIO JOSSES X Name of Person
34 Heron's Watch Weey S
Santarosa Beach FL 32408  City/State and Zip Code  Torres_01298 @ GMaile COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PATONIO TORIGS at (773 ) 630 9638  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee S130.00 Filing Fee S155.00 Filing Fee S160.00 Filing Fee.  Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Must contain the words "Limited Liability Co	Mpany, "J.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 Address:	Mailing Address:
34 Heron's Watch & Way & Santo Rosa Beach FL	9814 Beach Bluf persona CITY beach FL 32408
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.)	
Name	TOMES FIL FIL Way
34 Acron's water Florida street address (P.O. Box  Ponama City  City State	NOT acceptable)  Beacher 32408  Zip
Having been named as registered agent and to accept service of proces place designated in this certificate. I hereby accept the appointment as further agree to comply with the provisions of all statutes relating to the	ss for the above stated limited liability company at the registered agent and agree to act in this capacity. I

ANTONIO TONES

Registered Agent's Signature (REQUIRED)

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

IGR" Manager	Antonio lorres	1
	34 Heron's Watch way +	FL 324
	>	AON 8102
se attachment if necessary)	ASSEE	TLE 20
ive date is listed, the date must be specific and	d cannot be more than five business days prior to or 20 day	sffter ∪
e date inserted in this block does not meet the a ent's effective date on the Department of State's	applicable statutory filing requirements, this date will not be I s records.	isted as
VI: Other provisions, if any.		
<del></del> -		_
	V: Effective date, if other than the date of filing; ive date is listed, the date must be specific and filing.) e date inserted in this block does not meet the antis effective date on the Department of State's VI: Other provisions, if any.	Ise attachment if necessary)  V: Effective date, if other than the date of filing:  ive date is listed, the date must be specific and cannot be more than five business days prior to or the date in this block does not meet the applicable statutory filing requirements, this date will not be left; s effective date on the Department of State's records.

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 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.

A NTONIO TOTIES A
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)