

L19000090886

(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:

Tamika **GAVE**
CORRECTION BY PHONE TO
correct name
date 4/5/19

DOC. EXAM. _____

Office Use Only



700324610827

02/19/19--01037--029 **125.00

FILED
19 APR -5 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N CULLIGAN

FEB 25 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 25, 2019

JIMMY WRIGHT
18205 NW 88 PLACE
HIALEAH, FL 33018

SUBJECT: NEW LEVEL CONCRETE FINISHING L.L.C.
Ref. Number: W19000018475

We have received your document for NEW LEVEL CONCRETE FINISHING L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist II

Letter Number: 119A00003909

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: New Level Concret Finishing L.L.C
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:

Jimmy Wright
Name of Person

New Level Concret Finishing L.L.C
Firm/Company

18205 NW 88th
Address

Hialeah Florida 33018
City/State and Zip Code

JimmyWright821@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jimmy Wright at (954) 830-3504
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, 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 - Name:

The name of the Limited Liability Company is:

New Level Concrete Finishing L.L.C.
(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 Address:

18205 NW 88 Pl
Hialeah, FL 33018

Mailing Address:

18205 NW 88 Pl
Hialeah, FL 33018

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:

Jamel Wright
Name
18205 NW 88 Pl
Florida street address (P.O. Box **NOT** acceptable)
Hialeah FL 3
City State Zip

FILED
19 APR -5 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..

[Signature]
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

"MGR" = Manager

Jimmy Wright MANAGER

AMBR

Name and Address:

18205 NW 88 pl 2
Hialeah, FL 33018
Jimmy Wright
Jamel Wright
18205 NW 88 pl
Hialeah, FL 33018


(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 03/28/2019 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE 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 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.

Jimmy Wright
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)

FILED
19 APR -5 PM 12:42
STATE OF FLORIDA
TALLAHASSEE