

L19000110133

(Requestor's Name)

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(Business Entity Name)

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19 APR 29 PM 4:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

APR 30 2019

**COVER LETTER**

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

**SUBJECT:** JamGold Handyman Service  
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:

Earl M. Brown

Name of Person

JamGold Handyman Service

Firm/Company

1009 63rd Ave W. Apt # 5

Address

Brandenton Florida 34207

City/State and Zip Code

jamgold95@jamgoldhandyman.com .....boyboybrow75@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Earl Brown

941-

726-5145

at ( )

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)

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\$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 9, 2019

EARL M. BROWN  
1009 63RD AVE W APT #5  
BRADENTON, FL 34207

SUBJECT: JAMGOLD HANDYMAN SERVICE  
Ref. Number: W19000035784

We have received your document for JAMGOLD HANDYMAN SERVICE and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable. Please amend your document accordingly.

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: 719A00007100

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JamGold Handyman Service Limited Liability Company  
(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:

Mailing Address:

1009 63 rd Ave West Apt 5  
Brandenton FL 34207

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:

1009 63rd Ave West Apt # 5  
Name  
Earl M. Brown  
Florida street address (P.O. Box **NOT** acceptable)  
Brandenton FL 34207  
City State Zip

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SECRET  
FALL AND COUNTY CLERK

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..

Earl Brown

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

**Name and Address:**

Earl M. Brown

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 03/29/2019. (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:**

 B. BROWN

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.

Earl M. Brown

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)