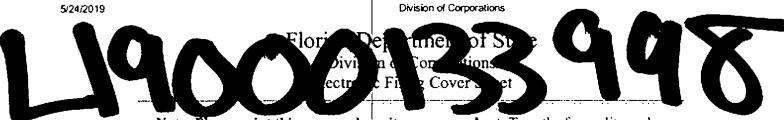
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FL PATEL LAW PLLC

Account Number : 120170000097 Phone : (727) 279-5037

Fax Number : (727)888-1294

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: brpearsonl16@gmail.com

FLORIDA LIMITED LIABILITY CO.

Facility Contracting Solutions, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. PAGE

MAY 29 2019



COVER LETTER

May 22, 2019

To: New Filing Section
Division of Corporation

Subject: <u>Facility Contracting Solutions, LLC</u>
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:

Kalpesh J. Patel, Esq.
FL Patel Law PLLC
360 Central Avenue
8th Floor
St. Petersburg, Florida 33701
Fax: 727-888-1294

For further information concerning this matter, please call or e-mail:

Kalpesh Patel at 727-279-5037 or e-mail at contact@flpatellaw.com

Enclosed is our fax filing coversheet for \$130.00 for Filing Fee & Certificate of Status

FL Patel Law PLLC

17278881294

Articles Of Organization

For

Facility Contracting Solutions, LLC

A

Florida Limited Liability Company

ARTICLE I

Name

The name of the Limited Liability Company is: Facility Contracting Solutions, LLC (the Company).

ARTICLE II

Address

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

12087 62nd Street North

Unit #11

Largo, Florida 33773

ARTICLE III

Registered Agent, Registered office, & Registered Agent's Signature:

The name and the Florida Street Address of the Registered Agent are:

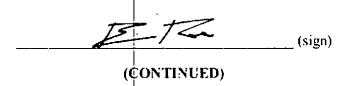
Brian Pearson

12087 62nd Street North

Unit #11

Largo, Florida 33773

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.



Page 2 of 4

ARTICLE IV:

→ 18506176381

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	Name and Address
AMBR = Authorized Member MGR = Manager	
<u>MGR</u>	Brian Pearson 12087 62nd Street North Unit #11 Largo, Florida 33773
<u>MGR</u>	Daniel Demint 12087 62nd Street North Unit #11 Largo, Florida 33773
<u>MGR</u>	Chris Bystrycki 12087 62nd Street North Unit #11 Largo, Florida 33773
<u>MGR</u>	Joshua Swango 12087 62nd Street North Unit #11 Largo, Florida 33773
<u>MGR</u>	Antonella Errante Beltran 12087 62nd Street North Unit #11 Largo, Florida 33773

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ARTICLE IV:

The Effective date shall be the date of filing.

(sign)

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.

> Brian Pearson Authorized Representative/Member