

L19000181863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

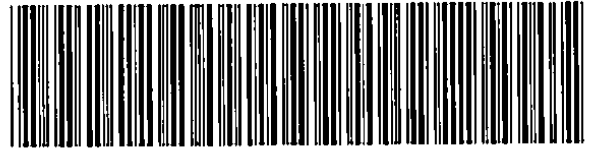
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

R KEMP

JUL 25 2019



700332421197

2019 JUL 25 PM 4:27
FALLASSIST, FL Court

2019 JUL 25 PM 4:27

FILED

2019 JUL 25 PM 2:07
FALLASSIST, FL Court

2019 JUL 25 PM 2:07

FILED

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 7/25/19

NAME: SWFL WINDOWS LLC

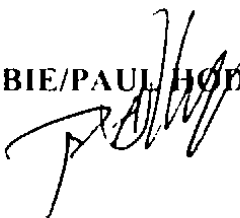
TYPE OF FILING: ARTICLES

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

SWFL WINDOWS LLC

ARTICLE II ADDRESS

The principal address of the Limited Liability Company is:

2204 SW 30TH TERRACE

CAPE CORAL, FLORIDA 33914

The mailing address of the Limited Liability Company is:

8415 S 700 W UNIT 35

SANDY, UTAH 84070

ARTICLE III REGISTERED AGENT

The name and the Florida street address of the registered agent are:

A1A REGISTERED AGENT INC.

5647 110TH AVENUE N

ROYAL PALM BEACH, FLORIDA 33411

FILED
19 JUL 25 PM 2:07
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF PALM BEACH
STATE OF 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.

X /s/ Tina Maki

TINA MAKI / Registered Agent's signature

ARTICLE IV AUTHORIZED PERSON(S)

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER

RICHARD TULIN

8415 S 700 W UNIT 35

SANDY, UTAH 84070

AUTHORIZED MEMBER

PAMELA LEWIS

2204 SW 30TH TERRACE

CAPE CORAL, FLORIDA 33914

X /s/ Richard Tulin

RICHARD TULIN / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

FILED
19 JUL 25 PM 2:07
CLERK OF COURT
JUL 25 2019