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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

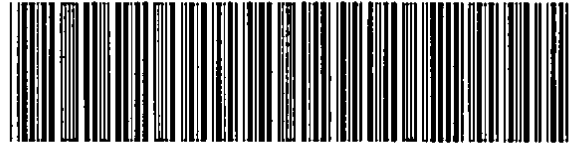
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/22/19--01002--017 **55.00

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2019 AUG 22 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. SAMS

AUG 22 2019

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Williamson AMS, LLC
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:

Robert Williamson
Name of Person

Williamson AMS, LLC
Firm/Company

4001 Harbor Hills Drive
Address

Largo, Florida 33770
City/State and Zip Code

phight63@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Williamson at (918) 706-2453
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

6/23/2019

TO Whom It May Concern:

A \$70 check was submitted with the
wrong form. This is the remainder \$55
to total \$125. Thank You

Peggy Williamson

918-951-4440

Williamson Real Estate, LLC

Williamson Aviation and Mechanical Services, LLC

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2019 AUG 22 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 11, 2019

ROBERT WILLIAMSON
613 MARSHALL STREET
CLEARWATER, FL 33755 US

SUBJECT: WILLIAMSON AMS, LLC
Ref. Number: W19000055486

FILED
2019 AUG 22 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for WILLIAMSON AMS, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

You have submitted the document and fees to form a Florida corporation; however, your name implies you wish to form a limited liability company. The name of a corporation cannot contain a limited liability company suffix. Limited Liability Company, L.L.C. and LLC are all limited liability company suffixes. The name of a corporation must contain Corporation, Corp., Incorporated, Inc., Company or Co.

Please correct the suffix or, if you wish to form a limited liability company, submit "Articles of Organization" along with the additional fee(s). Any fees previously submitted with your corporate filing will be applied to your limited liability company filing.

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the electronic filing cover sheet.

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.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 219A00011648

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Williamson AMS, LLC

(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:

4001 Harbor Hills Drive
Largo, Florida 33710

4001 Harbor Hills Dr.
Largo, Florida 33710

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:

Peggy Williamson
Name

4001 Harbor Hills Drive
Florida street address (P.O. Box ~~NOT~~ acceptable)
Largo, Florida 33710
City State Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 AUG 22 PM 2:37

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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..

Peggy Williamson

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

MGR

AMBR

Name and Address:

Robert Williamson
4001 Harbor Hills Drive
Largo, Florida 33770

Dean Williamson
4001 Harbor Hills Drive
Largo, Florida 33770

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 5/31/19 (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.

Robert Williamson
Typed or printed name of signer

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)

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2019 AUG 22 PM 2:37
CLERK OF STATE
AT TALLAHASSEE, FLORIDA