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August 20, 2019

ARTHUR KAUFMAN 8171 NADMAR AVE BOCA RATON, FL 33434

SUBJECT: ANY TIME GUTTER & SCREENING, LLC

Ref. Number: W19000077147

We have received your document for ANY TIME GUTTER & SCREENING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Letter Number: 019A00017165

Keyna E Page Regulatory Specialist II

www.sunbiz.org

# COVERLETTER

	ew Filing Section ivision of Corporations	
(9.79.1577)	ANY TIME ROOFING, GUT TER 8	& SCREENING, LLC
SUBJECT	Name of Li	imited Liability Company
The enclos	ed Articles of Organization and fee(s) a	ue submitted for filing.
Please retu	m all correspondence concerning this m	natter to the following:
	ARTHUR KAUFMAN	
		Name of Person
		Firm/Company
	S171 NADMAR AVE	
		Address
	BOCA RATON, FL 3343 (	
		City/State and Zip Code
	E mail address: (to be use	ed for future annual report notification)
For further is	oformation concerning this matter, pica	se cail:
	ARTHUR KAUFMAN 5	561 451-9000
	Name of Person	Area Code Daytime Felephone Number
(inclused)	a check for the following amount:	
\$125,00 F	ling Fee f130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & St60.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is each of a copy (additional copy is each of a copy is e
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassue, FL 32244	Street Address  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, 1-1, 32301

From: Eric Leventh 1 Fax: 19544858988 To: Fax: (850) 245-6804 Page: 5 of + 0/122/2019 10 53 AM

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

А	R'	ľij	( '	LE.	١.	Na	me:

The name of the Limited Liability Company is:

### ANY TIME ROOFING, GUTTER & SCREENING, LLC

(Must contain the words Himmed Liability Company,  $\mathrm{DLL}C_{\alpha^{\mathsf{T}}}$  or  $\mathrm{DLf}C_{\alpha^{\mathsf{T}}}$ 

## ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
SI71 NADMAR AVENUE BOCA RATON, FL 33434	8171 NADMAR AVENUE BOCA RATON, FL 33434	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

ADDITION MALERMANI

(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:

	Name	-
8171 NADMAR AV	ENUE	
Florida strect addres	s (P.O. Box <u>NOT</u> ac	ceptable)
BOCA RATON	FL.	33434
Chy	State	Zip

Having Leen named as registered agent and to accept service of process for the above stated limited liability company of the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further a gree to comply with the provisions of all statutes relating to the proper and complete performance of my ditties and I am familiar with and accept the obligations of my gasition gs registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

Registered Agent 3 Signature (REQUIRED)

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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		
MGR	ARTHUR KALEMAN	
	8171 NADMAR AVENUE	-
	BOCA RATON, FL 33434	-
		_
		-
		•
		•
<del></del>		-
		-
		-
(Use attachment if necessary)		
(If an effective date is listed, the date must be the date of filing.)	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 9 meet the applicable statutory filing requirements, this date will no must file is records.	
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:	toofm	
This document is exact I am aware that any fa	nomber or an authorized representative of a member, and in accordance with section 605.0203 (1) (b), Florida State is unformation submitted in a document to the Department of State ee felony as provided for in \$.817, 155, F.S.	
	ARTHUR KAUFMAN Typed or printed name of signee	<u> </u>
<del></del>	Typed or printed name of signee	, m

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)