L2000016379

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer.

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SECRETARY OF SINE

FILED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

C&S DESIGN & CON	ISTRUCTION	N 2020,		
LLC				
			į	
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
			√	L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
			✓	Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by: BA	1/22/20			UCC 1 or 3 File
Name	1/22/20 Date	Time		UCC 11 Search
Mailic	Date	THE		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		Construction 2020	
(Must cons	tin the words "Limited	Liability Company, '	"L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street a	ddress of the principal c	ffice of the Limited	Liability Company is:
<u>Princip</u>	al Office Address:		Mailing Address:
2820 72nd St. Ct. W.			72nd Ct. W.
Bradenton, FL 34209)	Brad	enton, FL 34209
•	address of the registered	i agent are;	You must designate an individual or
		i agent are;	
·	address of the registered	i agent are;	
	address of the registered	i agent are;	
·	Blalock Walters, P.A 802 11th Street West	i agent are;	
·	Blalock Walters, P.A. 802 11th Street West Florida street address	i agent are; Name s (P.O. Box <u>NOT</u> ac	eceptable)
The name and the Florida street aving been named as registered accedesignated in this certificate, with the property wit	Blalock Walters, P.A 802 11th Street West Florida street address Bradenton City agent and to accept serv I hereby accept the approvisions of all statutes r	Name S (P.O. Box NOT ac FL State ice of process for the ointment as registere elating to the proper	eceptable) 34209
ace designated in this certificate, rther agree to comply with the pi	Blalock Walters, P.A 802 11th Street West Florida street address Bradenton City agent and to accept serv I hereby accept the approvisions of all statutes r	Name S (P.O. Box NOT ac FL State ice of process for the ointment as registere elating to the proper	zeeptable) 34209 Zip above stated limited liability company a ed agent and agree to act in this capacity and complete performance of my duties

(CONTINUED)

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2020 JAN 22 PHI2: 29

<u>Flife:</u> "AMBR" = Authorized Memb	Name and Address: er
"MGR" = Manager	
MGR	Cynthia Wonnacott 2820 72nd Ct. W.
	Bradenton, FL 34209
MGR	Michael Wonnacott
	2820 72nd Ct, W, Bradenton, FL 34209
	Bradenton, FL, 34209
,	
EV: Effective date, if other that citive date is listed, the date m	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior to or 90
ctive date is listed, the date m f filing.)	ust be specific and cannot be more than five business days prior to or 90 loes not meet the applicable statutory filing requirements, this date will not
EV: Effective date, if other that ctive date is listed, the date in filling.) the date inserted in this block cannt's effective date on the De EVI: Other provisions, if any.	ust be specific and cannot be more than five business days prior to or 90 loes not meet the applicable statutory filing requirements, this date will not
EV: Effective date, if other that ctive date is listed, the date in filing.) the date inserted in this block of ent's effective date on the De EVI: Other provisions, if any. REQUIRED SIGNATURE:	ust be specific and cannot be more than five business days prior to or 90 foes not meet the applicable statutory filing requirements, this date will not partment of State's records.
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CV: Effective date, if other that ctive date is listed, the date mutifiling.) he date inserted in this block duent's effective date on the Dec. CVI: Other provisions, if any. REQUIRED SIGNATURE:	tions not meet the applicable statutory filing requirements, this date will not partment of State's records. Line Warnes to the applicable statutory filing requirements, this date will not partment of State's records.
EV: Effective date, if other that ctive date is listed, the date mutifiling.) the date inserted in this block of the date on the Deservice date on the Des	loes not meet the applicable statutory filing requirements, this date will not partment of State's records. Lie of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
EV: Effective date, if other that ctive date is listed, the date must filling.) the date inserted in this block of the date inserted at the Decent's effective date on the Decent's effect	tions not meet the applicable statutory filing requirements, this date will not partment of State's records. Line Warnes to the applicable statutory filing requirements, this date will not partment of State's records.
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EV: Effective date, if other that ctive date is listed, the date must filling.) the date inserted in this block of the date on the Deservit's effective date of the D	loes not meet the applicable statutory filing requirements, this date will not partment of State's records. Light Canacatter of a member or an authorized representative of a member. It is executed in accordance with section 605.0203 (1) (b), Florida Statutes. It any false information submitted in a document to the Department of State ind degree folony as provided for in s.817.155, F.S.