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(F	Requestor's Name)
(/	Address)
	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(0	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:
	Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Richard'S Home Improvements iability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Richard Conner Name of Person
Richards Home Improvements
63 center 6+
Address
Pancicea Fla 32346
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rame of Person at (BSD) ZSU-5210 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
El 125.00 Filing Fee

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Richard's Honie:	Improvements 2-	Trim
(Must conatin the words "Limited Liability Co	impany, "L.E.C" or "LLC.")	لسلك
RTICLE II - Address: he mailing address and street address of the principal office of the	Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
5000000 FIG 3234h	<u>uaron</u> y	

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:

ARTICLE 1 - Name:

A T

The name of the Limited Liability Company is:

Richard Conner

Name

63 Center St

Florida street address (P.O. Box NOT acceptable)

Renacted 61a 32346

City State Zip

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. Thereby 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..

Registered Agent's Signature (REQUIRED

(CONTINUED)

2016-6 PM12:04

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MCR" = Manager	Richard Connet	
AMBR	Richard Conner, Jr	
(Use attachment if necessary)		
(If an effective date is listed, the date must be spe the date of filing.)	of filing:	
ARTICLE VI: Other provisions, if any.	20 1	
	ت م ر-	_
REQUIRED SIGNATURE:	Convol	
This document is execute Lam aware that any false	ember or an authorized representative of a member, ted in accordance with section 605.0203 (1) (b). Florida Statutes, a information submitted in a document to the Department of State a felony as provided for in s.817.155, F.S.	
V.Richerc	Typed or printed name of signee	

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)