

5/6/2020

Division of Corporations

L2 0000120641
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.
Account Number : I20010000062
Phone : (323)962-8600
Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

Architect Paul Just, LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$155.00



March 9, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LEGALZOOM

SUBJECT: ARCHITECT PAUL JUST, LLC
REF: W20000025402

535957886

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.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6052.

Marti Simmons
Regulatory Specialist II
New Filing Section

FAX Aud. #: H20000075709
Letter Number: 620A00005152



January 20, 2020

Department of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

To Whom it May Concern,

I, Paul W. Just, III, hereby release and dissolve my Corporate name **Architect Paul Just, Inc.**, to Legal Zoom (Account #61275147) and give them full authorization to file the entity **Architect Paul Just, LLC**, on my behalf, as I will not be reinstating the dissolved business and have no intention of revoking the dissolution.

Architect Paul Just, Inc.
FEIN # 59-2477577

Architect Paul Just, Inc.

Paul W. Just, III
Its President

T - 954-383-1404
E - architectpauljust@gmail.com

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Architect Paul Just, 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:

Cheyenne Moseley, Legalzoom.com, Inc.

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N. Brand Blvd., 10th Floor

Address

Glendale, CA 91203

City/State and Zip Code

onlinefilings@legalzoom.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley 323 962-8600 ext. 7625

Name of Person at () 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Architect Paul Just, L.L.C.

(Must end with 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:2100 S Ocean Dr, Suite 6HFort Lauderdale, FL 33316

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:

Paul William Just III

Name

2100 S Ocean Dr, Suite 6HFlorida street address (P.O. Box NOT acceptable)Fort LauderdaleFlorida33316

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, 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.



 Registered Agent's Signature (REQUIRED)

Paul William Just III

(CONTINUED)

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 SECURED
 1 ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

FILED

ARTICLE IV-

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

Title:

AMBR - Authorized Member

MGR - Manager

AMBR

Name and Address:

Paul William Just III

2100 S Ocean Dr, Suite 611

Fort Lauderdale, FL 33316

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.

Chevening Moseley, Legalzoom.com, Inc.

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)