

5/22/2020

Division of Corporations

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 : MARY G STEWART CPA PA
Account Number : 12808000065
Phone : (941)258-3191
Fax Number : (941)258-3192

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

Email Address: Mary@PtCharlotteCPA.com

FLORIDA LIMITED LIABILITY CO.
PORT CHARLOTTE HOME SERVICES LLC

Certificate of Status	0
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Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION
OF
PORT CHARLOTTE HOME SERVICES LLC**

● **ARTICLE 1 – NAME**

The name of the Limited Liability Company is Port Charlotte Home Services LLC,
(hereinafter referred to as "Limited Liability Company").

● **ARTICLE 2 – ADDRESS**

The mailing address and street address of the principal office of this Limited Liability
Company shall be:

3813 Zambrana Avenue, North Port, FL 34286

● **ARTICLE 3 – REGISTERED OFFICE AND REGISTERED AGENT**

The name and street address of the registered agent of this Limited Liability Company is:

Andrew D Clark
3813 Zambrana Avenue
North Port, FL 34286

**ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF ORGANIZATION**

Having been named as registered agent 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 608, F.S..

By: _____

Andrew D. Clark, Registered Agent

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State of Florida
County of Charlotte

The foregoing instrument was acknowledged before me this 20th day of May, 2020, by

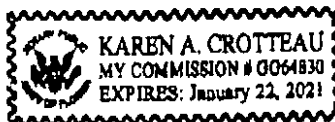
Andrew Clark

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced _____

Karen A. Crotteau

Notary Signature



• ARTICLE 4 – TITLE, NAME, AND ADDRESS OF ALL MANAGING MEMBERS

Andrew D Clark
3813 Zambrana Avenue
North Port, FL 34286

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

By: Andrew D Clark
Andrew D Clark, Organizing Member

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