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New Filing Section TO: 2020 JUN -8 AMII: 47 **Division of Corporations** JB Aluminum Services LLC SUBJECT: 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: Joseph D. Barnhorst Name of Person JB Aluminum Services LLC Firm/Company 440 Ave C, NE Address Winter Haven, FL 33881 City/State and Zip Code jbflydog@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joseph D. Barnhorst 863 557-0458 _at (____ Daytime Telephone Number Name of Person Area Code Enclosed is a check for the following amount: ■\$125.00 Filing Fee □\$155.00 Filing Fee & □\$130.00 Filing Fee & □\$160.00 Filing Fee.

Mailing Address

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Certificate of Status &

(additional copy is enclosed)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	F-11_
The name of the Limited Liability Company is:	
	2020 JUN - 8

The name of the Limited Liability Company is:	0000 1131 0 63111 4 7	
	2020 JUN -8 AM H: 47	
JB Aluminum Services LLC		
(Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")* § § 7	
ARTICLE II - Address:		
The mailing address and street address of the principal office of	of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
440 Ave C, NE	440 Ave C. NE	
Winter Haven, FL 33881	Winter Haven, FL 33881	
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Registanother business entity with an active Florida registration.)		
The name and the Florida street address of the registered agen	tare:	
Joseph D. Barnharet		

Name 440 Ave C, NE Florida street address (P.O. Box NOT acceptable) Winter Haven FL 33881 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)

(CONTINUED)

ARTICLE IV-

. .

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Joseph D. Barnhorst	
-	440 Ave C. NE	
	Winter Haven, FL 33881	
		
		
		
		
n effective date is listed, the date must be date of filing.)	date of filing: e specific and cannot be more than five but not meet the applicable statutory filing requient of State's records.	isiness days prior to or 90 days afto
FICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:		
	s de	
Oasey	and the same of th	
Signature of a	member or an authorized representativ	e of a member.
I am aware that any	secuted in accordance with section 605.0203 false information submitted in a document to gree felony as provided for in s.817.155. F.	o the Department of State
Joseph D. Bamho	ret.	
эозери О. Вапло	Typed or printed name of signee	
	cyped of printed name of signee	
	B3144 - #3	

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)