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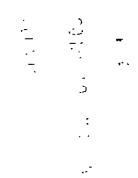
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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Receive 10-1

FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2020

JUDITH M. HAMMEN 1518 S. LAKE MIRROR DR NW WINTER HAVEN, FL 33881 3rd Submittar. Effictue dele has been revised to Nov. 10, i

SUBJECT: ADVANCED DESIGN CONCEPTS OF CENTRAL FLORIDA, LLC

Ref. Number: W20000107632

We have received your document for ADVANCED DESIGN CONCEPTS OF CENTRAL FLORIDA, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Derrick Thompson Regulatory Specialist II

Letter Number: 820A00017925





FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2020

JUDITH M. HAMMEN 1518 S. LAKE MIRROR DR NW WINTER HAVEN, FL 33881

SUBJECT: JH DESIGN BUILD, LLC.

Ref. Number: W20000089355

2nd Submitter. Planse pri

ADVANCED DESIGN CONCEPTS 6: CENTRA FLUILIDA, LLC

We have received your document for JH DESIGN BUILD, LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document number of the name conflict is L18000283404.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Derrick Thompson Regulatory Specialist II

Letter Number: 220A00015384





FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2020

JUDITH M. HAMMEN 1518 S. LAKE MIRROR DR NW WINTER HAVEN, FL 33881

SUBJECT: JH DESIGN BUILD, LLC.

Ref. Number: W20000089355

2nd S.bm. Hal. Please pri ADVANCED DESIGN CONCEPTS OF CENTRAL FLUICIDA, LLL

Letter Number: 220A00015384

We have received your document for JH DESIGN BUILD, LLC, and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document number of the name conflict is L18000283404.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Derrick Thompson Regulatory Specialist II

www.sunbiz.org

COVERLETTER 2nd Submitter

	Filing Section sion of Corporation	is Ao <i>va</i>	NCEO	DESIGN	CONCEPTS of	CENT
SUBJECT:		Name of Lir	Build, LLC	ty Company	CONCEPTS of	FLOR
The enclosed	Articles of Organiza	tion and fee(s) ar	e submitted	for filing.		
Please return	all correspondence c	oncerning this ma	itter to the f	allowing;		
Jt	idith M. Hammen					
_			Name of	Person		
— —	l Design Build; LL C	. ADVA	Y CEO	DESIGN C	concepts of ce	WTICA 1
	N		Firm/Cor			
15	18 S. Lake Mirror I)r NW				
_	-		Addro	285		
W	inter Haven, FL 33	881				
			ity/State and	l Zip Code	····	
<u>joh</u>	n,hammen50@gmai		for future a	mual report notifica	tion)	
For further infor	mation concerning t				,	
	n Hammen	86		651-2476		
——————————————————————————————————————		at {)		
	Name of Perse	n Ai	rea Code	Daytime Telephor	ne Number	
Enclosed is a c	sheek for the followi	ng amount:				
∏\$125.00 Fil		.00 Filing Fee & ate of Status	Certific	.00 Filing Fee & d Copy I copy is enclosed)	圖\$160,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclos	cd)
	Mailing Address	;		Street Address		

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

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

ARTICLES OF ORGANIZATION FOR IT ORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Lie	ibility Company is:					
 JH Design Ruild	ADVANCET	OE 5/1	ON C	ONCEPTS	5 of c	LENTH
(Must	contain the words "Limited	Liability Comp.	any, "L.L.C.	," or "LLC.")		- Floor
ARTICLE II - Address: The mailing address and stre	ect address of the principal c	office of the Lin	nited Liabilit	y Company is:		,
Pris	rcipal Office Address:			Mailing Addre	<u>288</u> :	
1518 S. Lake Mi Winter Haven, F				n, FL 33881		
ARTICLE III - Registered (The Limited Liability Companother business entity with The name and the Florida su	any cannot serve as its own an active Florida registratio	Registered Age m.)			ividual or	
	Judith M. Hammen			-		
		Name				•
	1518 S. Lake Mirror	Dr. NW			-	
	Florida street addres	s (P.O. Box <u>NC</u>	<u>)T</u> acceptabl	c)		
	Winter Haven, FL 3.	3881			•	
	City	State	<u> </u>	Zip		
Having been named as register place designated in this certific further agree to comply with the am fumiliar with and accept the	ate, I hereby accept the appo c provisions of all statutes re cobligations of my position of	ointment as regi dating to the pre	istered agent oper and com ent as provid	and agree to act it oplete performance led for in Chapter (r this capaci r of my dutie	$w_{i} T_{i} = 0$

(CONTINUED)

ARTICLE IV-

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

Name and Address:	
Judith M. Hammen	
1518 S. Lake Mirror Dr. NW	•
Wingi Haven, Pt. 33861	•
John T. Hammen	
1518 S. Lake Mirror Dr. NW Winter Haven, FL 33881	
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174	
A Novamba X 2020 /A-	-
of filing: August 1: 2020 (OPTIONAL)	
eific and cannot be more than five business days prior to or 90 o	days after
neet the applicable statutory filing requirements, this date will not	be listed a
of State's records.	
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M 24 _	
ember or an authorized representative of a member.	5
ted in accordance with section 605.0203 (1) (b), Florida Statutes, c information submitted in a document to the Department of State c felony as provided for in s.817.155, F.S.	: *
	.)
Typed or printed name of signee	
Filling Fees:	
	Judith M. Hammen 1518 S. Lake Mirror Dr. NW Winter Haven, FL 33881 John T. Hammen 1518 S. Lake Mirror Dr. NW Winter Haven, FL 33881 Physical Physics of the process of the process of filing: August 1-2020 cific and cannot be more than five business days prior to or 90 of the physics of the applicable statutory filing requirements, this date will not of State's records. M. August 1-2020 cific and cannot be more than five business days prior to or 90 of the physics of the phys

as

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)