## L21000014429

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP (X) WA)T MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300358273333

01/20/21--01018--003 \*\*180.01

911911 JAN 20 AM 9: L

7021 JAN 20 AM 9: 10

## COVER LETTER

TO:

**New Filing Section** 

Tallahassee, FL 32314

Division of Corporations		
SUBJECT: Chris Taylor Cu	ustom Concrete imited Liability Company	Construction, LU
The enclosed Articles of Organization and fee(s) a	re submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Christopher	Name of Person	
<del>.</del>	Firm/Company	71
4372 288th s	St.	
	Address	•
Branford, FL 32	8008	
	City/State and Zip Code	
ctccc 20	@ yahoo. Com	<del></del>
r:-mail address: (to be used	for future annual report notifical	ion)
For further information concerning this matter, pleas	se call:	
<u> </u>		
Christopher Taylor at 1.	<u>386 ) 292-390</u>	5
Name of Person 2	Area Code Daytime Telephor	ne Number
Enclosed is a check for the following amount:		
□S125.00 Filing Fee	☐S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street Address	
New Filing Section	New Filing Section Division	
Division of Corporations	The Centre of Tallahassee	
P.O. Box 6327	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
Chris Taylor Custom Concre	te Construction, 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:	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

ARTICLE I - Name:

(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:

| Aimberly Taylor | State | Stat

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

The name and address of each person a	uthorized to manage and control the Limited Liability Company:
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR MGR	Christopher Taylor 4372 288th St Branford, FL 32008
<u>AMBR</u>	Himberly Taylor 4372 288# 5F Branford FL 32008
(Use attachment if necessary)	
If an effective date is listed, the date must be sp he date of filing.)	c of filing:
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is execu I am aware that any fals constitutes a third degre	ted in accordance with section 605.0203 (1) (b). Florida Statutes, the information submitted in a document to the Department of State to felony as provided for in s.817.155, F.S.
CARISTORA	Typed or printed name of signce
	Typed or printed name of signce

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

S 5.00 Certificate of Status (Optional)