

L21000135643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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Matthew 20365

APR 01 2021

T. SCOTT



400357860744

01/22/21--01008--033 **150.00

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

2021 MAR 22 PM 1:32

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 15, 2021

JOSE A. CARRILLO
1338 SW HEBNER AVE
PORT ST. LUCIE, FL 34953

SUBJECT: TREASURE COAST FLEET SERVICES LLC
Ref. Number: W21000020365

We have received your document for TREASURE COAST FLEET SERVICES LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Fictitious name can not convert to llc,

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 621A00003337

3/16/21

TO MR. TYRONE SCOTT

MR. SCOTT I WOULD LIKE TO FILE
A NEW LLC NOT A CONVERSION. AND
I WOULD LIKE THE MONEY APPLIED TO
THE NEW LLC FILING.

Thank you

TREASURE Coast Fleet SERVICES LLC

REF# W21000020365

LETTER# 421A00004793

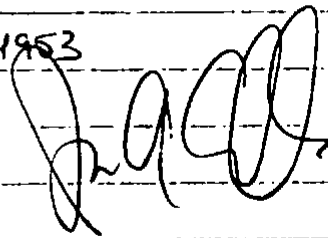
LETTER# 621A00003337

JOSE A CARRILLO

1338 SW HEBNER AVE

PORT ST LUCIE, FL 34953

(772) 828-5605



RECEIVED
2021 MAR 22 PM 4:04

COMMERCIAL
SERVICES

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Treasure Coast Fleet Services LLC

(Must contain 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:

901 Wagner Pl

Fort Pierce , FL 34982-6661

Mailing Address:

1338 Sw Hebner ave

Port St Lucie , FL 34953-6192

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:

Jose A Carrillo

Name

1338 Sw Hebner ave

Florida street address (P.O. Box **NOT** acceptable)

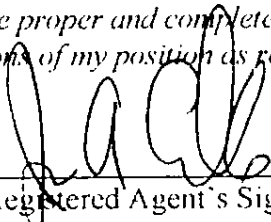
Port St Lucie

FL 34953

City

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)

2021 MAR 22 PM 1:32
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Jose A Carrillo

1338 Sw Hebner Ave

Port St Lucie , FL 34953

n/a

n/a

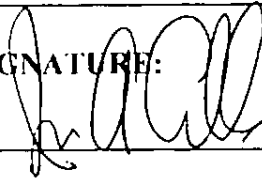
n/a

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

N/A

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.

Jose A Carrillo

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)