# L21000136188

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-J? WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer





100363229481

04/02/21--01009--017 \*\*160.00

\_\_\_\_\_AH 9:28

2021 AFR -2-AH 8:-55

#### COVER LETTER

TO: New Filing Section Division of Corporations	1
SUBJECT: Private Rubios Painting LL Name of Limited Liability Company	<u></u>
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	3
Francisco Rubio Name of Person	!
Private Rubios Painting Firm/Company	
7312 Lariat Ct. Talahassee	,
E-mail address: (to be used for future annual report notification)	I
For the ther information concerning this matter, please call:	
Trancisco Rubio at ( \$50) 570-1231  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status  Certificate Opy (additional copy is enclosed)  Certificate Opy (additional copy is enclosed)	ed)

#### Mailing Address

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

#### Street Address

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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:  The name of the Limited Liability Company is:  Trivate Pubios Panting (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Same 1312 Layat C+	 
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 another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  ### Trancisco Public  ###################################	2021 APR = 2
Name  7312 Laria + C+.  Florida street address (P.O. Box NOT acceptable)  Tallahassee FL. 32310  City State Zip	∄H 8: 55
laving been named as registered agent and to accept service of process for the above stated limited liability con place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this a further agree to comply with the provisions of all statutes relating to the proper and complete performance of m Im jumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, I	y duties, and l

(CONTINUED)

## ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "ANBR" = Authorized Member "MGR" = Manager (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of tiling.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any.

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 \$.817.155, F.S.

Francisco Rubio
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)

REQUIRED SIGNATUKÉ:

\$ 5.00 Certificate of Status (Optional)