

4/9/2021

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filings Cover Sheet

L2100152672

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000142007 3)))



H210001420073ABCR

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : GREENBERG TRAUIG (ORLANDO)
Account Number : 103731001374
Phone : (407)418-2435
Fax Number : (407)420-5909

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: LysRemodeling59@gmail.com**FLORIDA LIMITED LIABILITY CO.****Ly's Remodeling & Repair, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

4/18/21
SD

2021-APR-9 PM 11:18

2021-APR-9 PM 12:17

RECEIVED
CORPORATE
DIVISION

(((H21000142007 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LY'S REMODELING & REPAIR, 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:96091 Roxabogue Drive
Fernandina Beach, FL 32034**Mailing Address:**96091 Roxabogue Drive
Fernandina Beach, FL 32034**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:

Luan Ly

Name

96091 Roxabogue DriveFlorida street address (P.O. Box **NOT** acceptable)Fernandina BeachFL32034

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..

Luan Ly

Registered Agent's Signature (REQUIRED)

(CONTINUED)

(((H21000142007 3)))

31 APR 6 50 PM '21
02

((H21000142007 3)))

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Luan Ly

96091 Roxabogue Drive

Fernandina Beach, FL 32034

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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 filing.)

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.

REQUIRED SIGNATURE:

Ashton M Bligh

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.

Ashton M Bligh

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)

((H21000142007 3)))

ROGERS TOWERS, P.A.
1301 RIVERPLACE BOULEVARD, SUITE 1500
JACKSONVILLE, FLORIDA 32207
(904) 398-3911
(904) 396-0663 (Fax)

FACSIMILE TRANSMITTAL COVER SHEET

PLEASE DELIVER THE FOLLOWING PAGES TO:

Recipient Name: 8506176381

Fax Number: 18506176381

From: ROGERSTOWERS

MESSAGE:

Aimee Lopiano | Director of First Impressions

[cid:image001.png@01D72D30.85A210F0]

Rogers Towers, P.A. | 1301 Riverplace Blvd., Suite 1500 | Jacksonville, Florida 32207

Direct 904.398.3911 | Internal 3911 | Fax 904.396.0663 |

ALopiano@rtlaw.com<mailto:ALopiano@rtlaw.com> | www.rtlaw.com<http://www.rtlaw.com>

CONFIDENTIALITY NOTICE: This email is from the law firm of Rogers Towers, P.A. ("Rogers Towers") and the information in this email and all attachments to this email (the "Information") are intended solely for the intended recipient(s). The Information may be legally privileged and confidential. If you are not an intended recipient or you believe that you have received this email in error, please notify the sender immediately, delete the email from your computer, and do not review, use, disseminate, distribute or copy this email or the Information. Please also take the necessary steps to permanently remove any copies of the Information from your system and do not retain any copies, whether in electronic or physical form or otherwise. If you are not an existing client of Rogers Towers, do not construe anything in this email to create an attorney-client relationship between you and Rogers Towers unless the email contains a specific statement to that effect and do not disclose anything to Rogers Towers in reply that you consider confidential.

Handwritten notes and stamps in the bottom right corner, including a date stamp "APR 9 2021" and a signature.