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(Daywatada Nama)				
(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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COVER LETTER

	New Filing Sec Division of Cor					
SUBJEC		elding services LLC				
300020		Name of Lim	ited Liabilit	y Company		
The enclo	sed Articles of	Organization and fee(s) are	submitted f	or filing.		
Please ret	urn all correspo	ondence concerning this ma	tter to the fo	llowing:		
	Willie Evere	न्म				
	Name of Person					
	Everett's welding services LLC					
	Firm/Company					
	1935 Marshall St					
	Address					
	Bartow, FL 33830					
		Ci	ity/State and	Zip Code		
		E-mail address: (to be used	for future an	nual report notificati	on)	
For further	information co	ncerning this matter, please	call:			
	Willie Evere	tt (363	800-4	839	
	Nam	e of Person Ar	ea Code	Daytime Telephone	e Number	
Enclosed	is a check for t	he following amount:				
□\$125.0	0 Filing Fee	D\$130.00 Filing Fee & Certificate of Status	Certifie	00 Filing Fee & d Copy copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	

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:					
Everett's welding services LLC (Must conatin the words "Limited Liability Company, "L.L.C.," or "LLC.")						
ARTICLE II - Address: The mailing address and	: street address of the principal o	ffice of the Limited	Liability Company is:			
<u>]</u>	Principal Office Address:		Mailing Address:			
1935 Marshall St Bartow, FL 33830			1935 Marshall St Bartow, FL 33830			
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: Willie Everett Name						
	1035 Marchall St					
		1935 Marshall St Florida street address (P.O. Box <u>NOT</u> acceptable)				
	Bartow	FL	33830			
	City	State	Zip			
place designated in this cer further agree to comply wi	istered agent and to accept serve rtificate, I hereby accept the app th the provisions of all statutes re of the obligations of my position Regist	ointment as registe. elating to the prope as registered agent	red agent and agree to act in th r and complete performance of	iis capacity. I I my duties, and		

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Willie Everett
	1935 Marshall St
	Bartow, FL 33830
	100 march and Table 14 - 1775 from
(Use attachment if necessary)	
WEIGHT V. Effective data if athershows	the date of filing: (OPTIONAL)
for effective date is listed, the date must	it be specific and cannot be more than five business days prior to or 90 days after
r an effective date is fisted, the date must be date of filing.)	the specific and cannot be more than five business days prior to or 50 days after
	es not meet the applicable statutory filing requirements, this date will not be listed as
ne document's effective date on the Depa	
te document s'effective date on the Depa	Timent of State 5 records.
RTICLE VI: Other provisions, if any.	
	-
<u>REOUIRED</u> SIGNATURE:	1 1 0 2A
1/1/1	no // / 210T/
- Contra	a g mill
Signature	of a member or an authorized representative of a member.
This document is	s executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	ny false information submitted in a document to the Department of State
constitutes a unit	d degree felony as provided for in s.817.155, F.S.
Willie Ev	erett
mc_cv	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)