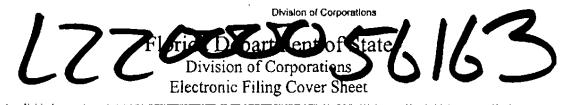
1/25/22, 6:34 PM



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.

(((H22000033050 3)))



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 : ON-SITE ACCOUNTING INC

Account Number : I20210000176 Phone : (813)764-9516 Fax Number : (813)764-0028

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

FLORIDA LIMITED LIABILITY CO.

Downsouth Garage Doors LLC

Certificate of Status	0
Certified Copy	0
Page Count	4
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

Tallahassee, FL 32314

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COVER LETTER

	New Filing Sec Division of Co								
SUBJEC	Downsout	h Garage Doors LL	С				TALLA	2022 J <i>i</i>	TI
00000	···	Nam	e of Limi	ited Liabil	ity Company		HASS	至 2	
The encl	osed Articles of	Organization and f	ee(s) are	submitted	for filing.		SSEE, F	2022 JAN 26 PM 12: 5	FILED
Please re	•	ondence concerning	this mat	ter to the f	following:		FORIDI	12:51	
	Pedro Toma	S					₹.		
				Name of	Person				
	Downshouth	Garage Doors LL	C						
				Firm/Co	трапу				
	2719 Quail (Oaks Drive							
			-	Addr	ess				
	Plant City, F	FL 33565							
	pedro@tomas	spedro.com	Cit	y/State an	d Zip Code				
			be used f	or future a	nnual report notificati	ion)			
For further	r information co	ncerning this matte	r, please	call:					
	Pedro Tomas	ı	813 at (ļ	370-3864				
	Nam	ie of Person		a Code	Daytime Telephon	e Number			
Enclosed	l is a check for t	he following amour	ıt:	·					
□\$125.0	00 Filing Fee	□\$130.00 Filing Certificate of Sta		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 F Certificate o Certified Cop (additional cop	f Status & Py	i)	
	New F Divisio	ig Address iting Section on of Corporations lox 6327			Street Address New Filing Section Di The Centre of Tallahe 2415 N. Monroe Stree	issee			

Tallahassee, FL 32303

H22000033050 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	rage Doors LLC				
(Mus	it contain the words "Limited	Liability Company,	"L.L.C.," от "LLC.")		
ARTICLE II - Address: The mailing address and st	reet address of the principal	office of the Limited	Liability Company is:		
<u>Pr</u>	incipal Office Address:		Mailing Address:		
2719 Quail Oal	ks Drive	2719	Quail Oaks Drive		
Plant City, FL:	33565	Plan	City, FL 33565		
				~	
(The Limited Liability Cor another business entity with	ed Agent, Registered Office, npany cannot serve as its own than active Florida registrationstreet address of the registere Pedro Tomas	n Registered Agent. ' on.)	You must designate an individual or AHASSER	2022 JAN 26 PM	
(The Limited Liability Cor another business entity with	mpany cannot serve as its own the an active Florida registration street address of the registere	n Registered Agent. ' on.)	You must designate an individual or AHASSER	JAN 2	
(The Limited Liability Cor another business entity with	mpany cannot serve as its own the an active Florida registration street address of the registere	n Registered Agent. Von.) d agent are: Name	You must designate an individual or AHASSER	JAN 26	
(The Limited Liability Cor another business entity with	mpany cannot serve as its own th an active Florida registration street address of the registere Pedro Tomas 2719 Quail Oaks Dr	n Registered Agent. Von.) d agent are: Name	You must designate an individual or AHASSEE, FLORIDA	JAN 26 PM 12:	
(The Limited Liability Cor another business entity with	mpany cannot serve as its own th an active Florida registration street address of the registere Pedro Tomas 2719 Quail Oaks Dr	n Registered Agent. Von.) d agent are: Name	You must designate an individual or AHASSEE, FLORIDA	JAN 26 PM 12:	

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)

H220000330503

H22000033050 3

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Pedro Tomas 2719 Quail Qaks Drive Plant City, FL 33565	
-		
		
		
(Una uttackymout if necessary)		
Tective date is listed, the date must be	date of filing:	or 90 days
LE V: Effective date, if other than the offective date is listed, the date must be of filing.) If the date inserted in this block does nument's effective date on the Departm	e specific and cannot be more than five business days prior to out meet the applicable statutory filing requirements, this date will	-
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