

1/25/22, 6:34 PM

Division of Corporations

**L2200003305056163**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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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.\*\*

Email Address: pedro@tomaspedro.com

2022 JAN 26 PM 12:51  
TALLAHASSEE, FLORIDA

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**FLORIDA LIMITED LIABILITY CO.**  
**Downsouth Garage Doors LLC**

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

1st Request  
1/27/22

2nd Request  
2/11/22

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## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Downsouth Garage Doors LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pedro Tomas

Name of Person

Downshouth Garage Doors LLC

Firm/Company

2719 Quail Oaks Drive

Address

Plant City, FL 33565

City/State and Zip Code

pedro@tomaspedro.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pedro Tomas

813

370-3864

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional 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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Downsouth Garage Doors 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:**2719 Quail Oaks DrivePlant City, FL 33565**Mailing Address:**2719 Quail Oaks DrivePlant City, FL 33565**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:

Pedro Tomas

Name

2719 Quail Oaks DriveFlorida street address (P.O. Box **NOT** acceptable)Plant CityFL33565

City

State

Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*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..*

Pedro Tomas

Registered Agent's Signature (REQUIRED)

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**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**MGR
Pedro Tomas  
2719 Quail Oaks Drive  
Plant City, FL 33565

(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:**Pedro Tomas

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.

Pedro Tomas

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)

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