# 12000165074

(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:	

Office Use Only



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D. O'KEEFE APR 2 0 2022

# COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: <u>Guillen's Painting Plus</u> 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:
Erick Builen Name of Person
Paining Firm/Company
1801 kernan Bird S APT 1105 Address
Jack Sonville, FL, 32246 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Erick Gullien at (904) 914-9505  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□S125.00 Filing Fee  Certificate of Status  Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

# <u>Mailing Address</u>

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

<u>Street Address</u> New Filing Section Division The Centre of Tallahassee 2415 N. Montoe 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:
(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: Mailing Address:
1801 Kernan Bird S -> AFT 1105 Jax, FL -32246
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:
Erick Gullen
1801 Kernan Blvd 5 #1105 Florida street address (P.O. Box NOT acceptable)
Jax FL 32246  City State Zip
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.
Registered Agent's Signature (REQUIRED)
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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	horized Member	Name and Address:
"MGR" = Mana	ger 	Erick Gullen
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# 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)