

5/18/22, 2:00 PM

# L22000214561

Division of Corporations  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

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**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 : WF TAXES AND MORE INC.  
Account Number : I20200000043  
Phone : (772)879-0010  
Fax Number : (772)879-0150

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

Email Address: Wftaxes.more@gmail.com

## FLORIDA LIMITED LIABILITY CO. QUICKLY PAINTING & MORE FL LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

RECEIVED

2022 MAY 19 AM 9:57

CORPORATIONS  
COMMERCIAL  
SERVICES

2022 MAY 19 PM 1:59

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** QUICKLY PAINTING & MORE FL 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:

MARCIO D DE CASTRO SOARES

Name of Person

QUICKLY PAINTING & MORE FL LLC

Firm/Company

1667 SW CARILLO AVE

Address

PORT SAINT LUCIE, FL 34953

City/State and Zip Code

WFTAXES.MORE@GMAIL.COM

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

For further information concerning this matter, please call:

MARCIO D DE CASTRO SOAR 772 985-2400  
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

2022 MAY 19 PM 1:58

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

The name of the Limited Liability Company is:

QUICKLY PAINTING & MORE FL 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:**1667 SW CARILLO AVE  
PORT ST. LUCIE, FL 34953**Mailing Address:**1667 SW CARILLO AVE  
PORT ST. LUCIE, FL 34953**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:

MARCIO D DE CASTRO SOARES

Name

1667 SW CARILLO AVEFlorida street address (P.O. Box **NOT** acceptable)

<u>PORT ST. LUCIE</u>	<u>FL</u>	<u>34953</u>
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)

(CONTINUED)

2022 MAY 19 PM 1:58

**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:**

AMBR \_\_\_\_\_

MARCIO D DE CASTRO SOARES

1667 SW CARILLO AVE

PORT ST. LUCIE, FL 34953

AMBR \_\_\_\_\_

CARLOS LOPEZ DE CASTRO

1667 SW CARILLO AVE

PORT ST. LUCIE, FL 34953

(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:**

*Marcio D de Castro Soares*

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.

MARCIO D DE CASTRO SOARES

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)

2022 MAY 19 PM 1:58

850-617-6381

5/19/2022 7:23:02 AM PAGE 1/001 Fax Server



May 18, 2022

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

WF TAXES AND MORE INC

SUBJECT: QUICKLY PAINTING & MORE FL LLC  
REF: W22000065311

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tammi Cline

Regulatory Specialist II Supervisor

FAX Aud. #: H22000177353

Letter Number: 822A00011404

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