

L22000352722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

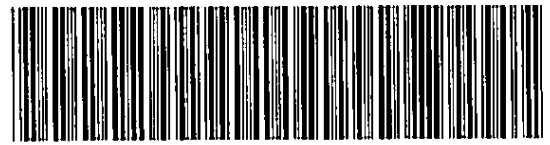
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2022 AUG 12 AM 3:00

W22000091123



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 11, 2022

JAMES E MASTROIANNI
FLORIDA FINE FINISH LLC
3184 W. COMMUNITY DR.
JUPITER, FL 33458 US

SUBJECT: FLORIDA FINE FINISH LLC
Ref. Number: W22000091123

We have received your document for FLORIDA FINE FINISH LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P22000038820 (FLORIDA FINE FINISHES INC).

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

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

Dil Sultana
Regulatory Specialist II

Letter Number: 622A00015430

2022 AUG 12 AM 3:00

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: South Florida Fine Finish 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:

James Mastroianni
Name of Person

South Florida Fine Finish LLC
Firm/Company

3184 W. Community dr.
Address

Jupiter, FL. 33458
City/State and Zip Code

Jmastro753@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Mastroianni at (541) 281-7222
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 (paid)
- \$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

Doc # W22000091123

2022 AUG 12 PH 2:24

2022 AUG 12 AM 3:00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

South Florida Fine Finish
(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:

<u>Principal Office Address:</u>	<u>Mailing Address:</u>
<u>3184 W. Community dr.</u>	<u>Same</u>
<u>Jupiter FL 33458</u>	

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.)

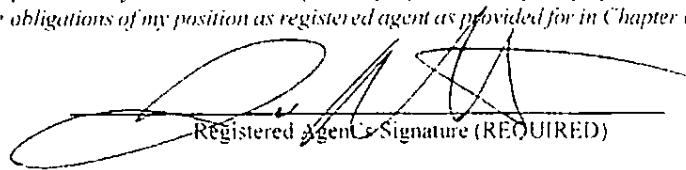
The name and the Florida street address of the registered agent are:

James Mastroianni
Name

3184 W Community dr.
Florida street address (P.O. Box ~~NOT~~ acceptable)

Jupiter OR 33458
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 AUG 12 PM 2:25

REGISTRATION
SECTION

2022 AUG 12 AM 3:00

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

- Co-perator

James Mastroianni

3184 W. Community dr. 33458
Jupiter Fl.

(Use attachment if necessary)

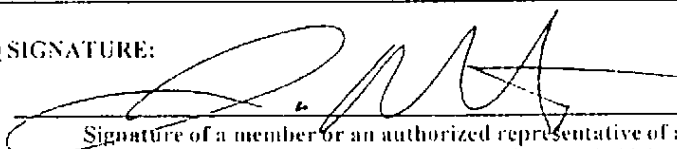
ARTICLE V: Effective date, if other than the date of filing: 8/10 (OPTIONAL)

(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:



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.

James Mastroianni

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

2022 AUG 12 AM 3:00

AUG 12 PM 2:25

ATTACH ORIGINAL ARTICLES

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