

L22 000447482

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22 OCT 19 PM 4: 26

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2022 OCT 19 AM 10: 14
TALLAHASSEE, FLORIDA

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 10/19/22

****WALK IN****

ENTITY NAME EUROPEAN AMERICAN WINDOW CONTRACTOR GROUP FL

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments
Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
Certificate of Status
Certificate of Status Reflecting: _____

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 125.00

ACCOUNT # 120140000108
United Corporate
Services, Inc.

Keith Sheppard

Please call Tina at the above number for any issues or concerns. Thank you so much.

ARTICLES OF ORGANIZATION OF EUROPEAN AMERICAN WINDOW CONTRACTOR GROUP FL., LLC

Under 605.0201 of the Florida Revised Limited
Liability Company Act

THE UNDERSIGNED, being a natural person of at least eighteen (18) years of age, and acting as the organizer of the limited liability company hereby being formed under Section 605.0201 of the Florida Revised Limited Liability Company Act certifies that:

ARTICLE I- Name

The name of the limited liability company is:

EUROPEAN AMERICAN WINDOW CONTRACTOR FL., LLC

ARTICLE II – Address

The mailing address and street address of the principal office of the Limited Liability Company is

<u>Principal Office</u>	<u>Mailing Address</u>
European American Window Contractor Group FL., LLC 6230 Shirley Street, Unit #203, Naples, FL 34109	European American Window Contractor FL., LLC 6230 Shirley Street, Unit #203, Naples, FL 34109

ARTICLE III – Registered Agent, Registered Office, and Registered Agent's Signature:

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

Marek Walawender
6230 Shirley Street, Unit #203,
Naples, FL 34109

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.

s/s Marek Walawender

Registered Agent's Signature
Name: Marek Walawender

ARTICLE IV

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

Company:

Title

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address

AMBR

Marek Walawender
6230 Shirley Street, Unit #203,
Naples, FL 34109

ARTICLE V – Effective date, if other than the date of filing: _____ (Optional).

ARTICLE VI – Other provisions if any.

I certify that I have read the above statements. I am authorized to sign these Articles of Organization, that the above statements are true and correct to the best of my knowledge and belief and that my signature typed below constitutes my signature. 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.

s/s Marek Walawender

By: Marek Walawender

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