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 : GIONIS, LILLY & ROMERO, PLLC

Account Number : I20220000060 Phone : (727)446-3333 Fax Number : (813)412-5118

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

Email Address:

FLORIDA LIMITED LIABILITY CO.

Preferred Windows, Doors & More, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00



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Corporate Filing Menu

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COVER LETTER

	w Filing Sect vision of Cor			
SUBJECT:		/indows, Doors & More L	LC	
JUBILET.		Name of Lin	nited Liability Company	
The enclose	d Articles of (Organization and fee(s) are	e submitted for filing.	
Please retur	n all correspo	ndence concerning this ma	atter to the following:	
	Brian C Sheri	k		
			Name of Person	
			Firm/Company	
	670 Deville [Dr. E		
			Address	
	Largo, FL, 33	3771		
			ity/State and Zip Code	·
<u> </u>		k@gmail.com		
	E	-mail address: (to be used	for future annual report notificati	ion)
For further in	formation con	ocerning this matter, please	call:	
!	Brian C Sherk	72 at (
_	Name		rea Code Daytime Telephon	e Number
Enclosed is	a check for th	e 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	a Address	Street Address	

Mailing Address

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

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

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The name of the Limited Liability Company is:

Preferred Windows, Doors & More, 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:	Mailing Address:
13863 Kimberly Drive	13863 Kimberly Drive
Largo, FL. 33774	Largo, FL. 33774

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:

Gionis, Lilly & Rom	ero, PLLC	
	Name	
1299 Main Street, St	e C	
Florida street addres	s (P.O. Box <u>NOT</u> acc	eptable)
Dunedin	Florida	34698
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)

4 3 5 K

ARTICLE IV-

(((H230001390923)))

	Name and Address:
"AMBR" = Authorized Men	ber
"MGR" = Manager	
MGR	Jeffrev S James
	13863 kimberly Drive
	Largo. FL, 33774
MGR	Brian C Sherk
	670 Deville Dr. E
	Largo, FL. 33771
	<u></u>
(Use attachment if necessary)
FICLE V: Effective date, if other to a effective date is listed, the date date of filing.) e: If the date inserted in this blockdocument's effective date on the light and the light an	than the date of filing: April 13, 2023 (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 days after k does not meet the applicable statutory filing requirements, this date will not be listed a Department of State's records.
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ICLE V: Effective date, if other to effective date is listed, the date ate of filing.) E: If the date inserted in this block document's effective date on the life of the lif	ture of a member or an authorized representative of a member. ent is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

as

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 5–30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)