

L23000219613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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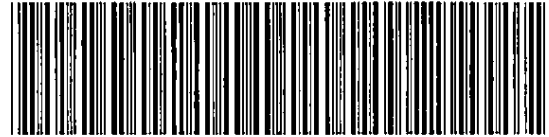
(Business Entity Name)

(Document Number)

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**COVER LETTER**

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

**SUBJECT:** FRANCESCO'S BUILDERS LLC.  
Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANCESCO GIUSEPPE RUBINO NAVA  
Name of Person

FRANCESCO'S BUILDERS LLC.  
Firm/Company

3002 FABUS CT  
Address

KISSIMMEE, FL 34758  
City/State and Zip Code

FRANCESCORUBINO7@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCESCO GIUSEPPE RUE 407 973-2932  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|---|---|---|

**Mailing Address**  
New Filing Section  
Division of Corporations  
The Centre of Tallahassee

**Street Address**  
New Filing Section Division  
The Centre of Tallahassee

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FRANCESCO'S BUILDERS 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:

3002 FABUS CT  
KISSIMMEE, FL 34758

Mailing Address:

3002 FABUS CT  
KISSIMMEE, FL 34758

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:

FRANCESCO GIUSEPPE RUBINO NAVA

Name

3002 FABUS CT

Florida street address (P.O. Box **NOT** acceptable)

<u>KISSIMMEE</u>	<u>FLORIDA</u>	<u>34758</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)

2023 MAY - AM 8:00

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**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

MGR- OWNER

FRANCESCO GIUSEPPE RUBINO NAVA

3002 FABUS CT

KISSIMEE, FL 34758

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 05/01/2023. (OPTIONAL)

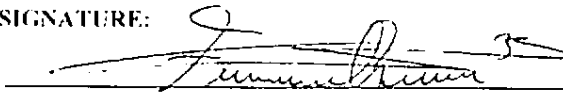
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.

BUILDER, BASE BORD, CONSTRUCTION, CONTRUCTION CLEANING, DRY WALL,  
REMODELATION.

**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.

FRANCESCO GIUSEPPE RUBINO NAVA

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)

2023 MAY - AM 8:53

FILED  
CLERK OF COURT  
JULY 10 2023

ED