

225000097139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

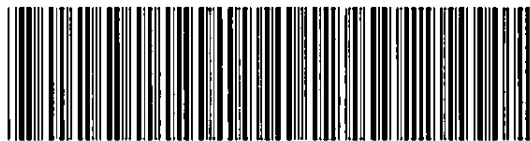
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



40044561644

RECEIVED  
FILED  
2025 MAR -6 PM 4:42  
2025 MAR -6 AM 9:47  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

18

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-54372  
(850) 524-6243

Please use funds from the account I20210000160: \$125.00

Authorization Signature 

Stanislaus Roofing LLC

Business Name

#Document

Walk in

       Will wait

       Certified Copy

       Certificate of Status

**NEW FILINGS**

       Profit  
       Not for Profit  
  X   LLC  
       Domestication  
       INC  
       CORP  
       LP

**AMENDMENTS**

       Amendment  
       Resignation of R.A.  
       Change of Registered Agent  
       Revocation of Dissolution  
       Conversion  
       Statement of Authority  
       Merger

       **REVOCATION OF DISSOLUTION**

**OTHER FILINGS**

       TRANSMITTAL LETTER

       Fictitious Name

       Statement of Authority

       APOSTIL                       
                    COUNTRY

EXAMINER'S INITIALS:                     

**REGISTRATION/QUALIFICATIONS**

       Foreign Filing  
       Partnership  
       Reinstatement  
       Statement of CORRECTION

       Domestication of a Foreign Corp.

                            Other

2025 MAR -6 PM 3:47

FILED

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-54372  
(850) 524-6243

Please use funds from the account I20210000160: \$125.00

Authorization Signature [Signature]

Stanislaus Roofing LLC

Business Name

#Document

Walk in

Will wait

☐ Certified Copy

☐ Certificate of Status

**NEW FILINGS**

☐ Profit

☐ Not for Profit

☒ LLC

☐ Domestication

☐ INC

☐ CORP

☐ LP

**AMENDMENTS**

☐ Amendment

☐ Resignation of R.A.

☐ Change of Registered Agent

☐ Revocation of Dissolution

☐ Conversion

☐ Statement of Authority

☐ Merger

☐ **REVOCATION OF DISSOLUTION**

**OTHER FILINGS**

☐ TRANSMITTAL LETTER

☐ Fictitious Name

☐ Statement of Authority

☐ APOSTIL \_\_\_\_\_  
COUNTRY

**REGISTRATION/QUALIFICATIONS**

☐ Foreign Filing

☐ Partnership

☐ Reinstatement

☐ Statement of CORRECTION

☐ Domestication of a Foreign Corp.

☐ \_\_\_\_\_ Other

EXAMINER'S INITIALS: \_\_\_\_\_

2025 MAR -6 PM 9:47

FILED

**COVER LETTER**

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

**SUBJECT:** Stanislaus Roofing 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:

Emerson Richard Webber

Name of Person

Stanislaus Roofing LLC

Firm/Company

2326 Gratia Pl.

Address

Casselberry, FL 32707

City/State and Zip Code

emerson@stanislausroofing.com

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

For further information concerning this matter, please call:

Emerson Richard Webber      407      687-7849  
at (      )  
Name of Person      Area Code      Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" 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  
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

FILED

2025 MAR -6 AM 9:47

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Stanislaus Roofing 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:

5830 Whippoorwill Lane  
Port St. Lucie, FL 34987

Mailing Address:

2326 Gratia Pl.  
Casselberry, FL 32707

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:

Emerson Richard Webber

Name

2326 Gratia Pl.

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

Casselberry

FL

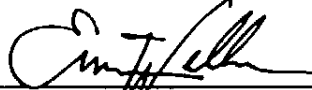
32707

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)

2025 MAR -6 AM 9:47

FILED

**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:**

MGR

Emerson Richard Webber

2326 Gratia Pl.

Casselberry, FL 32707

MGR

John Sebastian Morales

19037 Cochran Blvd.

Port Charlotte, FL 33948

(Use attachment if necessary)

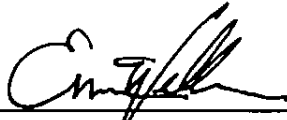
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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:**



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.

Emerson Richard Webber, Member

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)

FILED  
2025 MAR -5 1 PM 9:47