

T.S.H
719124

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: A1fireprotection L.L.C .
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:

Chantel Linville
Name of Person

Firm/Company

126 Lakes Blvd.

Address

Lake Park Ga. 31636
City/State and Zip Code

a1fireprotectionchantel@gmail.com

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

For further information concerning this matter, please call:

Chantel Linville at (636) 384-9030
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 &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

FILED

2001 JUN 11 PM 10:00
TALLAHASSEE, FL
STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

A1fireprotection L.L.C.

(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:

7901 4th St N

STE 300

St. Petersburg

FL

33702

Mailing Address:

7901 4th St N

STE 300

St. Petersburg

FL

33702

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:

Northwest Registered Agent LLC

Name

7901 4th St N

STE 300

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

St. Petersburg

FL

33702

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)

FILED
2021 JUL 11 PM 10:51
TAMPA FLORIDA

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

AMBR

Chantel Linville

414 4H Club Road

Lake Park Ga. 31636

(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:

Chantel Linville

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.

Chantel

Linville

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
2009 JUL 11 PM 1:05
TALLAHASSEE
FLORIDA
STATE

A1fireprotection L.L.C.

126 Lakes Blvd.

Lake Park Ga. 31636

636-384-9030

June. 26, 2024

Dear Florida State Business License,

Please find the application for a business license and proof of license in good standing with the state of Georgia. Thank you, Chantel

FILED
2024 JUN 11 PM 10:57
TALLASSEE, FLORIDA

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

ANNUAL REGISTRATION

Electronically Filed
Secretary of State
Filing Date: 3/16/2023 11:40:22 AM

BUSINESS INFORMATION

CONTROL NUMBER	15063646
BUSINESS NAME	A1 Fire Protection LLC
BUSINESS TYPE	Domestic Limited Liability Company
EFFECTIVE DATE	03/16/2023
ANNUAL REGISTRATION PERIOD	2023, 2024

PRINCIPAL OFFICE ADDRESS

ADDRESS	126 Lakes Blvd., Lake Park, GA, 31636, USA
---------	--

REGISTERED AGENT

NAME	ADDRESS	COUNTY
Chantel Linville	126 Lakes Blvd., Lake Park, GA, 31636, USA	Lowndes

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	Chantel Marie Linville
AUTHORIZER TITLE	Organizer