

L240000 316975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

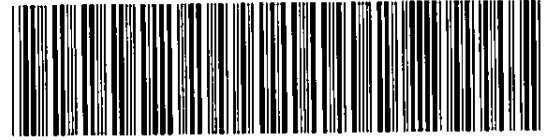
(Business Entity Name)

(Document Number)

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115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: 120000000088  
If there are any issues  
please contact Patrice at  
850-202-9071

Date: 07/18/2024

Name: Patrice Rush

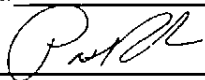
Reference #: 2440716

Entity Name: ALLAN INDUSTRIAL SUPPLY LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other \_\_\_\_\_

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 TALLAHASSEE, FL

Authorized Amount: \$125.00

Signature: 

CORPORATE HQ  
 COGENCY GLOBAL INC.  
 10 E 40<sup>TH</sup> ST, 10<sup>TH</sup> FL  
 NY, NY 10016  
 D: +1.212.947.7200  
 P: 800.221.0102  
 F: 800.944.6607

EUROPEAN HQ  
 COGENCY GLOBAL (UK) LIMITED  
 REGISTERED IN ENGLAND & WALES.  
 REGISTRY #8010712  
 6 LLOYDS AVE, UNIT 4CL  
 LONDON EC3N 3AX  
 +44 (0)20.3961.3080

ASIA PACIFIC HQ  
 COGENCY GLOBAL (HK) LIMITED  
 A HONG KONG LIMITED COMPANY  
 UNIT B, 1/F, LIPPO LEIGHTON TOWER  
 103 LEIGHTON RD, CAUSEWAY BAY  
 HONG KONG  
 P: +852.2682.9633  
 F: +852.2682.9790



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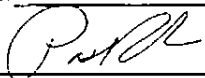
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2024 JUL 18 AM 9:47  
CLERK OF SUPERIOR COURT  
TALLAHASSEE, FL

Authorized Amount: \$125.00

Signature: 

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Allan Industrial Supply, 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:

2126 NE River Ct.

Jensen Beach, Florida 34957

2126 NE River Ct.

Jensen Beach, Florida 34957

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:

Frederick Nichols

Name

2126 NE River Ct.

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

Jensen Beach

Florida

34957

City


State

Zip

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CLERK OF DISTRICT COURT  
STATE OF FLORIDA

*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.,*

DocuSigned by:



902FC2AA07641EE

Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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

<u>AMBR</u>	<u>Frederick Nichols</u> <u>2126 NE River Ct.</u> <u>Jensen Beach, FL 34957</u>
_____	_____
_____	_____
_____	_____
_____	_____

(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.

\_\_\_\_\_  
\_\_\_\_\_

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**REQUIRED SIGNATURE:**

DocuSigned by:  


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.

Frederick Nichols  
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)