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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SIMPLY LAWN CARE, 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:	
RONALD HOGARTH	
(Name of Person)	
T&H COMPTROLLERS, INC.	
. (Firm/Company)	_
200 CAPRI ISLES BLVD., SUITE 2	
(Address)	
VENICE, FL 34292	
(City/State and Zip Code)	
For further information concerning this matter, please call:)ALI
RONALD HOGARTH at 941 484-4980	
(Name of Person) (Area Code & Daytime Telephone Number)	

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
SIMPLY LAWN (CARE, LLC	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability	Company is:
Principal Office Address:	Mailing Address:	
3321 MEADOW RUN GR. VENUCE, FL 34293	SAME	
VENICE, FC 34293		
·		
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re	gistered agent are:	ALCAN A
Tan Comption	Bes, Inc.	TANK PARK
200 CAPRI ISU Florida street address (P.O.	S Budo. Box NOT acceptable)	6.111.43
VENICE City, State, ar	FLORIDA 34292 nd 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 608, Florida Statutes.

Registered Agent's Agnature
NOMETO P. HOGARTH

Page 1 of 2 (CONTINUED)

The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGRM MGRM (Use attachment if necessary)

ARTICLE IV- Manager(s) or Managing Member(s):

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608,408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROMALD H. HALL

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent -

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)