

W04000094077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

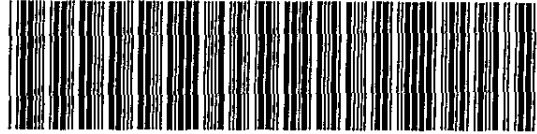
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700043270557

12/13/04--01048--022 **160.00

FILED
2004 DEC 29 AM 8:07
CORPORATIONS
TALLAHASSEE, FLORIDA

W04-45879
J. BRYAN DEC 16 2004

J. BRYAN DEC 30 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROBERTO LEYVA LANDSCAPING SERVICE
(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:

ROBERTO LEYVA
(Name of Person)

ROBERTO LEYVA LANDSCAPING SERVICE
(Firm/Company)

3517 NW 45TH AVENUE
(Address)

CAPE CORAL FL 33993
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERTO LEYVA at (239) 283-5118
(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) |
|--|--|---|---|

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

FILED
2004 DEC 29 AM 8:07
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 16, 2004

ROBERTO LEYVA
ROBERTO LEYVA LANDSCAPING SERVICE
3517 NW 45TH AVENUE
CAPE CORAL, FL 33993

SUBJECT: ROBERTO LEYVA LANDSCAPING SERVICE
Ref. Number: W04000045879

FILED
2004 DEC 29 AM 8:07
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for ROBERTO LEYVA LANDSCAPING SERVICE and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 304A00070021

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ROBERTO LEYVA LANDSCAPING SERVICE - Ltd. Coⁿ

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3517 NW 45TH AVENUE
CAPE CORAL FL 33993

Mailing Address:

SAME

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

ROBERTO LEYVA
Name

3517 NW 45TH AVE
Florida street address (P.O. Box **NOT** acceptable)

CAPE CORAL FL 33993 FL
City, State, and 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, F.S..


Registered Agent's Signature

(CONTINUED)

FILED
2009 DEC 29 AM 8:07
TALLAHASSEE, FLORIDA
CORPORATIONS

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

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

ROBERTO LEYVA

3517 NW 45TH AVENUE

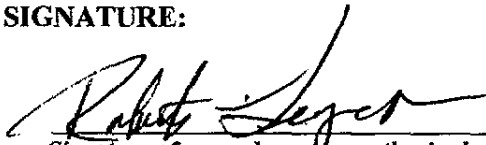
CAPE CORAL FL 33993

FILED
2004 DEC 29 AM 8:07
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

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.)

ROBERTO LEYVA

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)