

LO5000034520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

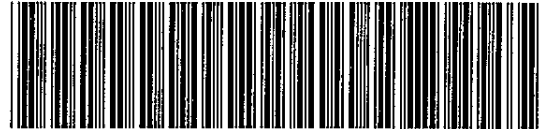
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name	
Availability	
Document Examiner	DCC
Updater	Office Use Only
Updater Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC



700049481657

04/06/05--01021--005 **125.00

10:17:00
2005 APR 6 PM 17
STATE OF TEXAS
COMPTROLLER OF PUBLIC ACCOUNTS

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIDA MOLD PATROL, 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:

SUSAN TIDBALL
(Name of Person)

FLORIDA MOLD PATROL, LLC
(Firm/Company)

488 N. PINE MEADOW DR.
(Address)

DEBARY, FL 32713
(City/State and Zip Code)

For further information concerning this matter, please call:

SUSAN TIDBALL at (386) 753-1399
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Games Street
Tallahassee, Florida 32399

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

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
MAY 17 2006

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLORIDA MOLD PATROL, 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:

1705 CRYSTAL CT
Jacksonville, FL 32259

1705 CRYSTAL CT.
JACKSONVILLE, FL 32259

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

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

SUSAN TIDBALL
Name

1705 CRYSTAL CT.
Florida street address (P.O. Box **NOT** acceptable)

Jacksonville FL 32259
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.

Susan E Tidball
Registered Agent's Signature

RECEIVED
MAY 13 2013
12:46 PM
STATE OF FLORIDA

(CONTINUED)

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:

MGRM

SUSAN TIDBALL
1705 CRYSTAL CT
JACKSONVILLE, FL 32259

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Susan E. Tidball
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.)

Susan E. Tidball
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)

RECEIVED
CORPORATE
DIVISION
JAN 11 2007
11:41 AM