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TRANSMITTAL LETTER

TO: Registration Section Division of Corp			
SUBJECT: Landstar A		d Liability Company)	
The enclosed Articles of 0	Organization and fee(s) are so	ubmitted for filing.	
Please return all correspon	ndence concerning this matte	r to the following:	
Todd Barfi	eld		٠.,
	C	Name of Person)	205
Landstar Appraisal Se	envices IIC		2005 HAY 19 PH 2: 25 2005 HAY 19 PH 2: 25 2007 ORPORATION OR FLORID
		Firm/Company)	Sign P
			POR FL
1100 SE 58th	Avenue		
		(Address)	A S
Ocala	Florida 34471		
		State and Zip Code)	
For further information co	oncerning this matter, please	call:	
Todd Barfield		at (352) 861-2522	
(Name of	f Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for	the following amount:		
	☐ \$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)
Registra Division 409 E. C	T ADDRESS: tion Section t of Corporations Jaines Street usee. Florida 32399	MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:				
Landstar Appraisal Services, LLC				
ARTICLE II - Address: The mailing address and street address of the pro-	rincipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
1100 SE 58th Avenue Ocala, Florida 34471	1100 SE 58th Avenue Ocala, Florida 34471			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:				
The name and the Florida street address of the registered agent are:				
Todd Barfield	SSE S			
Name	E. F.			
1100 SE 58th Avenue	08AT 22			
Florida street address (P.O. Box NOT acceptable)				
Ocala, Florida 34471 City, State, a	FL			

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)

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Todd Barfield 1100 SE 58th Avenue
	Ocala, Florida 34471
	DIN JOHN F.
	FILLU PA
<u> </u>	
(Use attachment if necessary)	2: 25 PRATION FLORIDA
NOTE: An additional article mus	t he 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.)

Todd Barfield

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)