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| (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL |
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| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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FILED 33 DEC -8 PH 6: 23

TRANSMITTAL LETTER

| SUBJECT: David GoldStick Job Site Services 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: David GoldStick (Name of Person) |
|---|
| Please return all correspondence concerning this matter to the following: |
| |
| David Goldstick (Name of Person) |
| |
| David Goldstick Job Site Services LLC (Firm/Company) |
| 780 Barger Dr. Detto |
| Deltona, Fl 32738 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| David Goldstick at 386 804 - 6.495 (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

| Tob Site Services LLC me principal office of the Limited Liability Company is: Mailing Address: 780 Barger Dr. Deltowa, Fl. 32738 ered Office, & Registered Agent's Signature: the registered agent are: |
|--|
| Mailing Address: 780 Barger DA De Howa, Fl 32738 ered Office, & Registered Agent's Signature: the registered agent are: |
| 780 Barger Dr. De Howa, Fl 32738 ered Office, & Registered Agent's Signature: the registered agent are: |
| De Hona, Fl 32738 ered Office, & Registered Agent's Signature: the registered agent are: |
| De Hona, Fl 32738 ered Office, & Registered Agent's Signature: the registered agent are: |
| ered Office, & Registered Agent's Signature: the registered agent are: |
| the registered agent are: |
| rane rane (P.O. Box NOT acceptable) |
| s (P.O. Box NOT acceptable) FLORIDA 32738 ate, and Zip |
| |
| t service of process for the above stated limited liability hereby accept the appointment as registered agent and with the provisions of all statutes relating to the proper niliar with and accept the obligations of my position as in Chapter 608, Florida Statutes |
| lellie A 3 gent's Signature 5 3 |
| ate t se her w nill in |

Page 1 of 2 (CONTINUED)

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.)

Typed or printed name of signee

Filing Feer:

\$100.00 Flling Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)