

L0300 0005347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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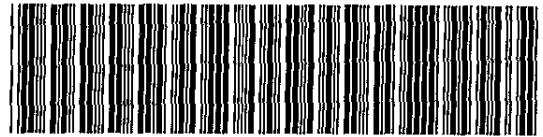
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

AND
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2-13-03

2325 Lakeshore Blvd
Jacksonville, FL 32210
(904) 591-2571

Advanced Landscaping & Lawncare Management, LLC

February 10, 2003

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed are the Articles of Organization and the check for filing in the amount of \$125.00.

Please feel free to contact me if you have any questions or concerns regarding this matter.

Sincerely,



Joy Owenby

Enclosures (2)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Advanced Landscaping & Lawncare Management, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
2325 Lakeshore Blvd.
Jacksonville, FL 32210

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

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

Gary Owenby

Name

2325 Lakeshore Blvd.

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

Jacksonville, FL 32210

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

(An additional article must be added if an effective date is requested)

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.)

Gary Owenby

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED