

L03 0000 32813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

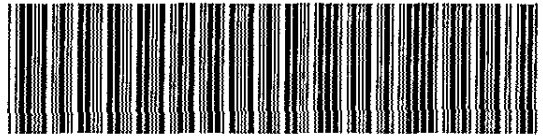
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200022520782

08/29/03--01018--007 **160.00

FILED
03 AUG 29 AM 11:26
FALLASSEE, TEXAS

Kuiet Kut Landscaping ,LLC
2220 S.W. 146th Street
Newberry, Florida 32669
Voice: 352.332.5283 Fax:352.333.6688 Moblie:352.745.2774

August 25, 2003

Attached to this letter are the completed articles of organization for
Kuiet Kut, LLC and a check for the fees related to its processing. If
you have any question please contact me or my manager at:

Kuiet Kut
2220 S.W. 146th Street
Newberry, Florida 32669
352.332.5283
352.333.6688 fax
352.745.2774 cell

If I can be of any future assistance please do not hesitate to contact
me.

Thank you,

Patrick Capella

FILED

03 AUG 29 AM 11:26

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KUIET KUT
(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:

TOM TONNELIER
(Name of Person)

KUIET KUT
(Firm/Company)

2220 S.W. 146TH ST
(Address)

NEWBERRY FL 32669
(City/State and Zip Code)

For further information concerning this matter, please call:

PAT Capella at (352) 332-5283
(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

FILED
03 AUG 29 AM 11:26
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: KUIET KUT, LLC

ARTICLE II - Address:

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

Principal Office Address:

TOM TONNELIER
2220 S.W. 146TH ST
Newberry, FL 32667

Mailing Address:

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

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

TOM TONNELIER
Name
2220 S.W. 146TH ST
Florida street address (P.O. Box NOT acceptable)
Newberry FL 32667
City, State, and Zip

FILED
03 AUG 29 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

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:

Managing Member

TOM TONNELIER

14116 N.W. 21ST LN

GAINESVILLE, FL 32606

MGR

PATRICK CAPELLA

7525 S.W. 22ND AVE

GAINESVILLE, FL 32607

(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.)

Tom Tonnelier

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)

FILED
03 AUG 29 AM 11:26
TALLAHASSEE, FLORIDA