# W3000051610

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Constitution,
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DIVISION OF CERTORATION

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# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sego Salvage and Land Cleaning, L.L.C. (Namb 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:
DAUS Sego Sir. (Name of Person)
Sego Salvage and Land Cleaning, L.L.C.
1174 Gamble Rd (Address)
Monticello t1. 32344  (City/State and Zip Code)
For further information concerning this matter, please call:
Davis Sego at (850) 997-5868 (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street

TO:

Tallahassee, Florida 32399

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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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$\boldsymbol{\Gamma}$			<b></b>	-11-1		-	114	.111	

The name of the Limited Liability Company is:

Sego Salvage and Land Clearing, 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:
Monticello, Fl. 32344	1174 Gamble Rd Monticello, Tl. 32344
Monticello, Fl. 32344	Monticello, Il. 32344
	,

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

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

DAVIS Sego Na	Se .	
174 Gamble Florida street address (		OT acceptable)
Monticello City State	FL te, and Zip	32344
ony, our	,	

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

Registered Agent's Signature

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S...

(CONTINUED)

Page 1 of 2

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SECKEIARY OF STATE
ANALYSEE, FLORIDA

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tl	hat th	e facts	stated	here	in are tr	ue.) 0 5 Inted nar				-	-

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)