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(Re	questor's Name	9)
. (Ad	dress)	
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(Cit	y/State/Zip/Pho	ne #)
PICK-UP	MAIT	MAIL.
(Bu	siness Entity N	ame)
(Do	cument Numbe	er)
Certified Copies	_ Certificat	es of Status
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TRANSMITTAL LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: PARK AVENUE CONTRACTIONS (Name of Limited Liability Company)		
(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:		
JEFF PARKER		
(Name of Person)		
JEFF PARKER (Name of Person) Carpentry PARK AVENUE LONTRACTING LLC		
(Firm/Company)		
3606 54 ST W # C-3		
(Address)		
BRADENTON, FL 34209 (City/State and Zip Code)		
For further information concerning this matter, please call:		
CHARLES PARKER at (352) 256 3728		
(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

ARTICLE I - Name: The name of the Limited Liability Company is: PARK AVENUE CONTRACTING / LLC		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limite	d Liability Company is:	
Principal Office Address: Mailing Address	<u>!</u>	
3606 54 ST W #C-3 3606 54	ST W. #C-3	
BRADENTON, FL 34209 BRADENTON	, FL 34209	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent s Signature: The name and the Florida street address of the registered agent are: JEFFREY PARKER Name SECOLUMN SEC		
BRADENTON, FLORIDA 34209		

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, Florida Statutes..

Registered Agent ☐s Signature

Page 1 of 2 (CONTINUED)

The name and address of each Manager or Managing Member is as follows:		
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	CHARLES PARKER 3606 SY ST. W #C-3 BRADENTON, FL 34209	
(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	n authorized representative of a member.	
(In accordance with section 6	608.408(3), Florida Statutes, the execution affirmation under the penalties of perjury true.)	

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

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)

Typed or printed name of signee