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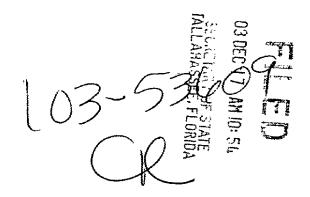
Michael A. Long	
Muhaul Ai Long (Requestor's Name) 14994 (Acmartic Lalamente (Address)	
14994 Ucmartic Col (Address)	
(Address)	
Tallahassee, Ft 32309 (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL LONGS LOWN & Land Scaping (Business Entity Name)	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Long's Lawn 3 La	nd scaping Ltd. Co.
ARTICLE II - Address: The mailing address and street address of the principal	
Principal Office Address:	Mailing Address:
14994 Cromartie Rd	14994 Cromortie Rd
Tallahassee, Fr. 32309	Tallohassee, Fr 32309
ARTICLE III - Registered Agent, Registered Office. The name and the Florida street address of the registere	
Michael A. Long	<u>, , , , , , , , , , , , , , , , , , , </u>
14994 Comartie la. Florida street address (P.O. Box No.	Off acceptable)
Tallahassee FI City, State, and Zip	32309
Having been named as registered agent and to accept seliability company at the place designated in this certifical registered agent and agree to act in this capacity. I furth statutes relating to the proper and complete performance accept the obligations of my position as registered agent. Registered Agent's Signation	the, I hereby accept the appointment as ther agree to comply with the provisions of all to of my duties, and I am familiar with and to as provided for in Chapter 608, F.S

ARTICLE IV- Manager(s) or Ma The name and address of each Man	anaging Member(s): lager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Muchael A. Long 14994 comartic Kd
(Use attachment if necessary)	
REQUIRED SIGNATURE:	ember or an authorized representative of a member.
(In accordance with of this document of that the facts state	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury dherein are true.) Typed or printed name of signee

\$ 5.00 Certificate of Status (Optional)