# 103000054915

(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



100025111021

12/04/03--01010--003 \*\*130.00

FILED
2003 DEC 22 AM 10: 22
2003 DEC 22 AM 10: 22
DIPARION CORPORATIONS
DIPARION CORPORATIONS

4 BRYAN DEC 37405

J. BRYAN DEC 2 2 2003

# TRANSMITTAL LETTER

	Division of Corporations	
•	SUBJECT: Tyler Well & Pune LLC (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:	
	Chris Tyler  J(Name of Person)	g. <b>1</b>
	Tyler Well & Pump (Firm/Company)	WELL OF CORRECTION OF THE PARTY
	1217 Varner Rd.	TO BE
	Davenport Fl 33837 (City/State and Zip Code)	
	For further information concerning this matter, please call:  Susur Tyler at (863) 421-6058  (Name of Person) (Area Code & Daytime Telephone Number)	
	(Casa South Following Phanoet)	

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section

MAILING ADDRESS:

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



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 10, 2003

CHRIS TYLER TYLER WELL & PUMP 1217 VARNER RD. DAVENPORT, FL 33837

SUBJECT: TYLER WELL & PUMP LLC

Ref. Number: W03000037405

Mand Williams The State of the

We have received your document for TYLER WELL & PUMP LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We didn't receive the 1st page of document. Please send back the 1st page,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan — Document Specialist

Letter Number: 503A00066357

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

THIS OF THE PARTY OF THE PARTY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Tyler Well & Pump 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:
1217 Varner Rd.	1217 Varner Rd.
Davenport, EL	Davenport, FL
33837	33837

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

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

Chris Tyler

Name

1217 Varner Rd.

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

Davenport Florida, 33837

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, Fibrida Statutes..

Registered Agent's Signature

Page 1 of 2 (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  "MGRM" = Managing Member	Name and Address:  Chris Tyler 1217 Varner Rd. Davenport, F1 3:		
(Use attachment if necessary)			
REQUIRED SIGNATURE:  Signature of a member or an au  (In accordance with section 608.	added if an effective date is requested.  athorized representative of a member.  408(3), Florida Statutes, the execution ffirmation under the penalties of perjury ie.)		

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)