

L03000055/56

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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EFFECTIVE DATE
1-1-04

12/23/03 --01017--001 **125.00

12/23/03 --01014--005 **30.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC 23 AM 8:43

RECEIVED
03 DEC 23 AM 8:35
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAY AREA DIVERSIFIED PROPERTY SERVICE, 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:

EFFECTIVE DATE
1-1-04

Richard Penton
(Name of Person)

BAY AREA DIVERSIFIED PROPERTY SERVICES
(Firm/Company)

8249 Fox Hollow Drive
(Address)

Port Richey FL - 34668
(City/State and Zip Code)

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For further information concerning this matter, please call:

Rick Penton at (813) 404-1676
(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

EFFECTIVE DATE

ARTICLE I - Name:

The name of the Limited Liability Company is:

Property Services LLC

BAY AREA Diversified

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

8249 Fox Hollow
Port Richey FL
34668

8249 Fox Hollow
Port Richey FL
34668

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

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

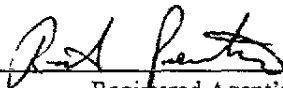
Rick Pentow
Name

8249 Fox Hollow
Florida street address (P.O. Box NOT acceptable)

Port Richey FL 34668
City, State, and Zip

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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:

MGRM

Rick Penton

8249 Fox Hollow

Port Richey 34668

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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

Make Effective DATE 1-1-04

REQUIRED SIGNATURE:

Rick Penton

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.)

Rick Penton

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)