

L04000003658

Lyles Trucking LLC  
(Requestor's Name)

2775 Crawfordville Hwy  
(Address)

(Address)

Crawfordville FL 32327  
(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

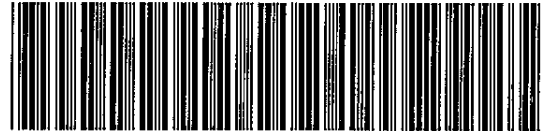
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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Lyles Trucking LLC.

**ARTICLE II - Address:**

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

**Principal Office Address:**

2775 Crawfordville Hwy  
Crawfordville Fl 32327

**Mailing Address:**

2775 Crawfordville Hwy  
Crawfordville Fl 32327

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

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

Otto LeRoy Lyles  
Name

62 Russett Dr.  
Florida street address (P.O. Box **NOT** acceptable)

Crawfordville FLORIDA 32327  
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, Florida Statutes..*

Otto LeRoy Lyles  
Registered Agent's Signature

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TALLAHASSEE, FLORIDA

**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

Otho LeRoy Lyles  
62 Russell Dr.  
Crawfordsville - Fl. 32367

MGRM

Terry McDonn  
38 Stanley Dr  
Crawfordsville Fl 32367

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(Use attachment if necessary)

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TALLAHASSEE

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

**REQUIRED SIGNATURE:**

Otho LeRoy Lyles  
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.)

Otho LeRoy Lyles  
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)