## L04000005173

(Requestor's Name)  (Address)  (Address)	400027000584
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)	01./20/0401014023 **125.00 <sup>-</sup>
Special Instructions to Filing Officer:  ALL When Ready  350 - 224 - 1178	RECEIVED  04 JAN 20 PM 1: 04  DIVISION OF CONFORMION TALLA
Office Use Only	JAN

TRANSMITTAL LETTER	
TO: Registration Section Division of Corporations  SUBJECT: Sunch Const Co LLC  (Name of Limited Liability Company)	
SUBJECT: Banch Const Co 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:	
JAMES O. Bungh (Name of Person)	
Rane4 Const Co 460 (Firm/Company)	<del></del> -
824 Oolden St Unit A	
TAIL 7 ( 3230) (City/State and Zip Code)	
For further information concerning this matter, please call:	-
Tames O. Bunch at (450) 224 1178  (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:	是 生
Bunch construction company, LLC	40
ARTICLE II - Address: The mailing address and street address of the princip	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
824 Golden St unitA 7A11 Z1 32301	824 Odden St 4n: + A TAIL 21 32301
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ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Name

824 Crolden St Unit A

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

TAll

FL 32361

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, F.S.

Registered Agent's Signature

(CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	JAMES O. Bunch 824 Gilden S+ Unit F 1211 Fl
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(Use attachment if necessary)  NOTE: An additional article must	be added if an effective date is requested.
(In accordance with s	<u> </u>
	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)