

LO4 060006805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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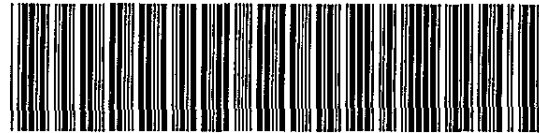
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LO4-6805  
JL



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

January 14, 2004

WAYNE RANREW  
4018 BEXHILL DRIVE  
NEW SMYRNA BEACH, FL 32168

SUBJECT: WAYNE'S GRADING SERVICE  
Ref. Number: W04000001834

We have received your document for WAYNE'S GRADING SERVICE and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 704A00002590

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WAYNE'S GRADING SERVICE  
(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:

WAYNE R. RANEN  
(Name of Person)

WAYNE'S GRADING SERVICE  
(Firm/Company)

4018 Bexhill DR  
(Address)

NEW SMYRNA BCH FL. 32168  
(City/State and Zip Code)

For further information concerning this matter, please call:

WAYNE R. RANEN at (386) 689-3154  
(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

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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:

WAYNE'S GRADING Service L.L.C.

**ARTICLE II - Address:**

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

**Principal Office Address:**

4018 Bexhill DR  
New Smyrna Bch.  
Fl. 32168

**Mailing Address:**

4018 Bexhill DR  
New Smyrna Bch.  
Fl. 32168

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

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

WAYNE R. RANER  
Name

4018 Bexhill DR.  
Florida street address (P.O. Box **NOT** acceptable)

New Smyrna Bch FLORIDA 32168  
City, State, and Zip

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TALLAHASSEE, FLORIDA

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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, Florida Statutes..*

Wayne R. Raner  
Registered Agent's Signature

**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:**

MGR

WAYNE R. RANEN  
4018 Box Hill DR  
NEW SMYRNA BCH, FL 32168

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(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Wayne R. Ranen  
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.)

WAYNE R. RANEN  
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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**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)**