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## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Marshall Skeen Construction 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:
Morshall Skeen (Name of Person)
MARSHAU SKEEN CONST. (Firm/Company)
2628 Juniper Drive
Edgewater Fl. 32141-5410 (City/State and Zip Code)
For further information concerning this matter, please call:
Marsing Skeen at (386) 214-0521 (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:		
MARSHALL SKEEN CON	IST. LLC.	
ARTICLE II - Address: The mailing address and street address of the principal	l office of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
MARSHALL SKEEN CONST. LLC,	7	-
2628 JUNIPER DR.	<u>Same</u>	
EDGEWATER, FT. 32141-5410		
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register	ed agent are:	
MARSHALL SKE	SEN SAFEB -4	·T]
E628 JNIFER DR. Fiorida street address (P.O. Box M.	YOT	
EDGENTIER FO	LORIDA 32KU1-5410	

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..

Registered Agon's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Manage The name and address of each Manage		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR_	MARSHALL R. SKEEN 2628 JUNITER DR. COGGRATER, FL. 32141-5410	-
MGRM	COMPLYMER, FL. 32141-3410	****
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(Use attachment if necessary)		
NOTE: An additional article must b	e added if an effective date is requested.	
REQUIRED SIGNATURE:		
	authorized representative of a member.	. =. :-
(In accordance with section 60 of this document constitutes an that the facts stated herein are t	8.408(3), Florida Statutes, the execution affirmation under the penalties of perjury rue.)	
Joshua (	N. SKEEN rinted name of signee	=

- <u>Filing Fees:</u> \$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)