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J. BRYAN FEB 18 2004

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ralph Pigott Trucking & Land Clearing 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:

Ralph F. Pigott Jr.  
(Name of Person)

Ralph Pigott Trucking & Land Clearing LLC  
(Firm/Company)

136 Pigott Woods Dr.  
(Address)

Crawfordville 19 32325  
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Ralph F. Pigott Jr. at ( 850 ) 528-4212  
(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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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Ralph Pigott Trucking & Land Clearing LLC

ARTICLE II - Address:

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

Principal Office Address:

136 Pigott Woods Dr  
Crawfordville GA 32327

Mailing Address:

136 Pigott Woods Dr  
Crawfordville GA 32327

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

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

Ralph E. Pigott Jr.  
Name

136 Pigott Woods 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..

[Signature]  
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

MGR M

**Name and Address:**

Ralph F. Pigott Jr.  
136 Pigott Woods Dr  
Crawfordville FL 32327

(Use attachment if necessary)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**REQUIRED SIGNATURE:**

  
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.)

Ralph F. Pigott Jr.  
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)