

L04000016506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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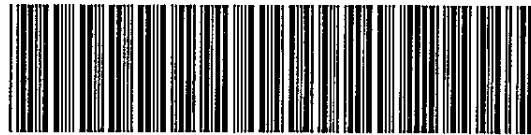
(Business Entity Name)

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02/12/04--01006--019 **133.75

03/03/04--01002--003 **21.25

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2004 MAR -1 PM 3:27
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

W04-7370

J. BRYAN FEB 20 2004

J. BRYAN MAR - 4 2004

JOHN C. TRENTELMAN

ATTORNEY AT LAW

207 NORTH MAGNOLIA AVENUE
P.O. BOX 5863
OCALA, FLORIDA
34475

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REAL ESTATE
PROBATE
GENERAL PRACTICE

February 10, 2004

Corporate Records Bureau
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee Florida 32314

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Re: KYLE RIKE PLUMBING, LLC.

Gentlemen:

Enclosed please find original and one copy of Articles of Organization of the captioned limited liability corporation which I ask that you approve and file.

Also enclosed is a check to your order in the sum of \$133.75 representing statutory filing fee, costs of certifying one copy of the Articles, the filing tax, and certificate of resident agent.

Would you kindly certify the enclosed copy and return it to me.

Very truly yours,


John C. Trentelman

JCT/vmc
enclosure



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

February 20, 2004

JOHN C. TRENTMAN
207 NORTH MAGNOLIA AVE.
PO BOX 5863
OCALA, FL 34475

SUBJECT: KYLE RIKE PLUMBING LLC
Ref. Number: W04000007370

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TALLAHASSEE, FLORIDA

We have received your document for KYLE RIKE PLUMBING LLC and your check(s) totaling \$133.75. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$21.25.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 204A00011753

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

KYLE RIKE PLUMBING LLC

A LIMITED LIABILITY COMPANY

(Pursuant to Chapter 608, Florida Statutes)

1. **Name.** The name of the limited liability company is Kyle Rike Plumbing LLC.
2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.
3. **Address of Principal Office.** The street address of the principal office of the limited liability company is:

6700 NW 90th Ave., Ocala, FL 34482
4. **Mailing Address.** The mailing address of the limited liability company is:

6700 NW 90th Ave., Ocala, FL 34482
5. **Members at Time of Formation.** There will be at least one member at the time the limited liability company is formed. The initial member is Kyle Rike, 6700 NW 90th Ave., Ocala, FL 34482.
6. **Period of Duration.** The period of duration shall be perpetual.
7. **Management.** Management of the Limited Liability Company at the time of formation is reserved for the initial member(s).
9. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida Street address of the registered agent are::

Kyle Rike
6700 NW 90th Ave.
Ocala, FL 34482

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.

Kyle Rike

8. **Effective Date.** The effective date of the limited liability company shall be:

Feb. 9, 2004

Kyle Rike
Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)

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