104000023979

P.O. BOX 2224

FORT WALTON, FLORIDA 32518

(City/State/Zip/Phone #)

| PICK-UP | WAIT | MAIL

(Business Entity Name)

(Document Number)

Certified Copies | Certificates of Status |

Special Instructions to Filing Officer:

Office Use Only

BOBBIE SMITH LAND CLEARING, LLC

MR. BOBBIE SMITH



600029563516

03/01/04--01037--015 **100.00

U3/30/04--01052--U20 **25.00



WOY-9973

J. BRYAN MAR 3 1 2004

TRANSMITTAL LETTER

	egistration Section ivision of Corporations	
SUBJECT	: BOBBIE SMITH LAND CLEARING, LLC (Name of Limited Liability Company)	
	(Name of Limited Etaolity Company)	
The cuclose	ed Articles of Organization and fee(s) are submitted for filing.	20 6 W
	Please return all correspondence concerning this matter to the following:	THE SEE FLORIDA
	BOBBIE SMITH, "MGRM"	77 70
	(Name of Person)	ALOS S
	BOBBIE SMITH LAND CLEARING, LLC	
	(Firm/Company)	
	205 COMBS MANOR	
	(Address)	
	FORT WALTON, FLORIDA 32548	
	(City/State and Zip Code)	
For further	information concerning this matter, please call:	
BO:	BBIE SMITH at (850) -244-2118	
	(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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 12, 2004

BOBBIE SMITH BOBBIE SMITH LAND CLEARING, LLC P.O. BOX 2224 FORT WALTON, FL 32518

SUBJECT: BOBBIES' SMITH LAND CLEARING, LLC

Ref. Number: W04000009973

We have received your document for BOBBIES' SMITH LAND CLEARING, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

You completed the wrong form,

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Letter Number: 504A00016654

Joey Bryan Document Specialist MILLAND SECTIONS
FILE ON 2: 29

ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

	ORGANIZATION
	FOR LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is	THE STATE OF THE S
BOBBIE SMITH LAND CLEARING,	шс
ARTICLE II - Address: The mailing address and street address of the particle.	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
205 CCMBS MANOR	POST OFFICE BOX 2224
FORT WALTON, FLORIDA 32548	FORT WALTON, FLORIDA, 32518
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the name	registered agent are:
	عداد الله الله الله الله الله الله الله ا
205 COMBS MANOR Florida street address (P.C	D. Box NOT acceptable)

Having 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 Agent's Signature BOBBIE SMITH, "MGRM"

Page 1 of 2 (CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
"MGRM"	BOBBIE SMITH
-	205 COMBS MANOR
	FORT WALTON, FLORIDA 32548
	<i>ve</i>
<u> </u>	
	*
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
a Bothie Sn	well BOBBIE SMITH, "MGRM"
Signature of a member or a	n authorized representative of a member.
(In accordance with section 6	08.408(3), Florida Statutes, the execution in affirmation under the penalties of perjury

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)

Typed or printed name of signee

AFFIDAVIT

STATE OF FLORIDA COUNTY OF OKALOOSA CITY OF FORT WALTON

THIS is to state under oath that I, BOBBIE SMITH am the Sole Owner of : BOBBIE SMITH LAND CLEARING, LLC.

Owning 100% of the LLC.

All Licenses, Machines, etc. is registed to me and in my name.

MANAGING MEMBER OF LLC

SHIRLEY

NOTARY PUBLIC

MY COMMISSION EXPIRES MARCH 23, 2005

SEAL

