## L04000024756

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
_ `\
PICK-UP WAIT MAIL
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(Business Entity Name)
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SECRETARY OF STATE
TALLAHASSTE, FLORID



## TRANSMITTAL LETTER

	gistration Section vision of Corporations	
SUBJECT:	: HANNAH PLUMBING, LLC (Name of Limited Liability Company)	TALLAR TO A APR -1
The enclose	ed Articles of Organization and fee(s) are submitted for filing.	RYOF STATE A 1:56
	Please return all correspondence concerning this matter to the following:	STATI LOAN
	LARRY PITTMAN	8 5
	(Name of Person)	
	(Firm/Company)	
	2018 TRIMBLE ROAD	
	(Address)	<del></del>
	TALLAHASSEE, FLORIDA 32303	7
	(City/State and Zip Code)	
For further	information concerning this matter, please call:	
	ANN HILL at ( 850 ) 241-0123	
	(Name of Person) (Area Code & Daytime Telephone Numbe	er)

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 Compa	ny is:
HANNAH PLUMBING, LLC	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2018 TRIMBLE ROAD	SAME
TALLAHASSEE, FLORIDA 32308	
ARTICLE III - Registered Agent, Registered and the Florida street address o	stered Office, & Registered Agent's Signature: of the registered agent are:
LARRY	PITTMAN
	Name
2018 TRI	IMBLE ROAD
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
TALL	AHASSEE, FLORIDA 32303
City.	State, and Zin

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 Agent's Signature

Page 1 of 2 (CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	LARRY PITTMAN
	2018 TRIMBLE ROAD TALLAHASSEE, FL 32303
(Use attachment if necessary)	
NOTE: An additional article mus	t be added if an effective date is requested.
NOTE: An additional article must REQUIRED SIGNATURE:	t be added if an effective date is requested.
	t be added if an effective date is requested.
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:  Signature of a member or  (In accordance with section	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an 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)