

W0400000 28601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

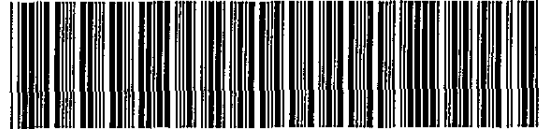
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/26/04--01037--006 **125.00

SHOULD BE
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TALLAHASSEE, FLORIDA

APR 1 2004

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W04-28601
CFL



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 5, 2004

DWAIN WILLIAMS
1740 NW 27 AVENUE
FORT LAUDERDALE, FL 33311

SUBJECT: DWAIN P. WILLIAMS TREE SERVICE AND TRASH HAULING
SERVICE

Ref. Number: W04000013157

We have received your document for DWAIN P. WILLIAMS TREE SERVICE AND TRASH HAULING SERVICE and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 304A00022118

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TALLAHASSEE, FLORIDA
APR 16 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dustin P. Williams Tree Service and trash
hauling Service
(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:

Dustin P. Williams
(Name of Person)
Dustin P. Williams Tree Service and trash hauling
Service
(Firm/Company)
1740 NW 27 Avenue
Ft. Lauderdale, Florida
(Address)
(City/State and Zip Code)

For further information concerning this matter, please call:

Wendy Jones / Dustin at (904) 731-2268/-
(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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TALLAHASSEE, FLORIDA

SEP 14 PM 4:05

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Dustin P. Williams tree Service and trash hauling Service
L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

3310 NW 16 Street
Fort Lauderdale,
Florida, 33311

Mailing Address:

1740 NW 27 Avenue
Fort Lauderdale, Florida
33311

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

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

Dustin P. Williams
Name

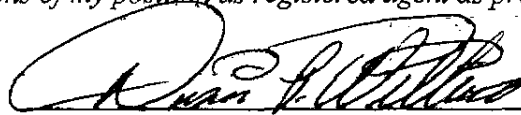
1740 NW 27 Avenue
Florida street address (P.O. Box **NOT** acceptable)
Fort Lauderdale FL 33311
City, State, and Zip

CLERK OF STATE
TALLAHASSEE, FLORIDA

03 APR 16 PM 4:06

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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..


Registered Agent's Signature

(CONTINUED)

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

Name and Address:

_____	_____
_____	_____
_____	_____
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(Use attachment if necessary)

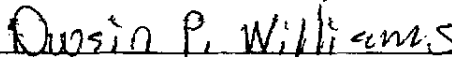
NOTE: An additional article must be added if an effective date is requested.

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.)



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)

CLERK OF STATE
TALLAHASSEE, FLORIDA

04 APR 14 PM 4:06

FILED