

L04000043799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

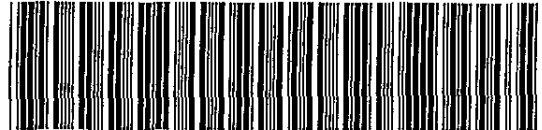
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A & D HAULING, 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:

LAWRENCE DENNIS SPENCER, JR.
(Name of Person)

A & D HAULING, LLC
(Firm/Company)

400 5th Avenue
(Address)

LABELLE, FL. 33935
(City/State and Zip Code)

For further information concerning this matter, please call:

AMANDA SPENCER at (239) 229-8064
(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

04 JUN 10 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 20, 2004

LAWRENCE DENNIS SPENCER, JR
A & D HAULING, LLC
400 5TH AVE
LABELLE, FL 33935

SUBJECT: A & D HAULING, LLC
Ref. Number: W04000019554

We have received your document for A & D HAULING, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article I.

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) 245-6025.

Trevor Brumbley
Document Specialist

Letter Number: 104A00035380

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

A & D Hauling, LLC

ARTICLE II - Address:

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

Principal Office Address:

400 5th Avenue
LABELLE, FL. 33935

Mailing Address:

400 5th Avenue
LABELLE, FL. 33935

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

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

LAWRENCE D. SPENCER, JR.
Name

400 5th Avenue
Florida street address (P.O. Box NOT acceptable)
LABELLE, FL. 33935
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, F.S..

✓ Lawrence D. Spencer Jr.
Registered Agent's Signature

(CONTINUED)

04 JUN 10 PM 4:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
AND
FILE

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:

MGRM

LAWRENCE D. SPENCER, JR.,
400 5th AVENUE
CAPE CIRCLE, FL. 33935

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

✓ Lawrence D. Spencer Jr.
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.)

LAWRENCE D. SPENCER, 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)

04 JUN 10 09:46:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA