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Certified Copies	_ Certificate	s of Status
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DEPART LEAVERAIN

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FLORIDA FILING & SEARCH SERVICES, T. P.O. BOX 10662 TALLAHASSEE, FL 32302

PHONE: (850) 668-4318 FAX: (850) 668-3398

DATE: 6-18-04

NAME: THE ZONE GARDEN AND LAWN SERVICES, LLC

TYPE OF FILING: ORGANIZATION

COST: \$125

RETURN:

ACCOUNT: FCA000000015

AUTHORIZATION:

ABBIE/PAUL HODGE



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing add		ipal office of the Limited Liability Com
Principal Office	Address:	Mailing Address:
3021 SE Dura	nt Street	60 William Street
Stuart, FL 3	4997-5084	Suite 200
	Registered Agent, Registered Of the Florida street address of the regis	Wellesley, MA 02481 Tice, & Registered Agent's Signature stered agent are:
		Nice, & Registered Agent's Signature stered agent are:
	ne Florida street address of the regit	Nice, & Registered Agent's Signature stered agent are:
	Capitol Corporate Service Name 1333 N Duval St, FL	Nice, & Registered Agent's Signature stered agent are:
	Capitol Corporate Service	Nice, & Registered Agent's Signature stered agent are:
	Capitol Corporate Service Name 1333 N Duval St, FL	Nice, & Registered Agent's Signature stered agent are:

registered agent as provided for in Chapter 608, Florida Statutes.

Della contact and a Signature

Page 1 of 2 (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	Name and Address:	
"MGRM" = Managing Member		
MGR	Andres De Andres	
-		
(Use attachment if necessary)		
NOTE: An additional article must	t be added if an effective date is requested.	
REQUIRED SIGNATURE:	un authorized representative of a member.	
(In accordance with section	508.408(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)

Typed or printed name of signee