## L040000 61107

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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SECHELING OF STATE
TALLAHASSEE FLORIDA

LO4-61107 Al.

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Rod Lamphier Fran (Name of Limited Liability Company)	ning LoloC
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter t	o the following:
Rodney Lamphier (Name of Person)	
Rod Lamphier Fram	ing LLC
15 Morgan St. (Address)	-
Auburn dale FL 3383 (City/State and Zip Code)	3
For further information concerning this matter, please call:	44 S S
Rodney Lamphier at (863) 41 (Area Code & Daytim	a-5a37 E #
	7 PH SSEE, F

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 Company is:	
Rod Lamphier Framing	LLC
ARTICLE II - Address: The mailing address and street address of the principal office of	the Limited Liability Company is:
Principal Office Address: Mailin	g Address:
15 Morgan St. 15	Morgan St.
Auburndale, FL 33823 Aub	urndile, FL 33823
ARTICLE III - Registered Agent, Registered Office, & Registered agent at the registered agent ag	
Rodney Lamphier	TALLO AL
15 Morgan St. Florida street/address (P.O. Box NOT accepta	
Auburndale FLORIDA City, State, and Zip	33823 PAR 1: 29

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)

The name and address of each Manager or N	Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	ame and Address:
MGR F	Sodney Lamphier  5 Morgan St.  14 Hourndale FL 33823
MGRM IS	James Cook 11 26 N.W. inter Haven, Fl 33880
(Use attachment if necessary)	
NOTE: An additional article must be add	led if an effective date is requested.
Signature of a member or an author of this document constitutes an affirm that the facts stated herein are true.)	3), Florida Statutes, the execution

ARTICLE IV- Manager(s) or Managing Member(s):

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)

Daney Jamphiev
Typed or printed name of signee