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(Re	equestor's Name)	<u> </u>
(Ac	ldress)	
(Ac	(dress)	
(Ci	ty/State/Zip/Phone #)	
	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: Gator Pressure Cleaning 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:

Joel	David	Rossmell

(Name of Person)

Gator Pressure Cleaning LLC

(Firm/Company)

4315 60th avenue

(Address)

Vero Beach, Florida 32967

(City/State and Zip Code)

For further information concerning this matter, please call:

Joel David Rossmell	at 772 4737797
(Name of Person)	(Area Code & Daytime Telephone Number) All SS SS FT F C
STREET ADDRESS:	MAILING ADDRESS
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Gator Pressure Cleaning LLC

#### **ARTICLE II - Address:**

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

#### **Principal Office Address:**

4315 60th avenue

Vero Beach, Florida 32967

#### Mailing Address:

4315 60th avenue

Vero Beach, Florida 32967

#### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are

Florida street address of the registered agein are.	
Joel David Rossmell	AUG
Name	23 SSI
4315 60th avenue	
Florida street address (P.O. Box NOT acceptable)	1:21 LORI
Vero Beach, Florida 32967 FLORIDA	μ μ
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, Florida Statutes..

Registered Agent's 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:

<u>Title:</u> "MGR" = Manager		Name and Address:
"MGRM" = Managing Member		
MGRM		Joel David Rossmell
		4315 60th avenue
		Vero Beach, Florida 32967
	-	
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(Use attachment if necessary)		

# NOTE: An additional article must be added if an effective date is requested. $\ge c$

REQUIRED SIGNATURE:	LLAHAS	04 AUG	T
Signature of a member or an authorized representative of a member.	SSE	23	No. of Concession, Name
(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.)	E.FLORI	PH 1:24	T
Typed or printed name of signce			

Filing Fees:

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\$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)

Page 2 of 2