40000 724

(Re	equestor's Name)	
(Ac	ddress)	<u> </u>
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bo	usiness Entity Nar	ne)
<u> </u>	ocument Number)	
(5.	oddinent Nambery	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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10/05/04-01011-018 **125.00

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Registration of an LLC

To Whom It May Concern:

Please find the enclosed registration forms concerning the registration of the following named

business:

As Always, At Your Service, LLC _

3426 Glocca Morra Dr. Apopka, FL 32703

Sincerely

3426 Giocca Morra Dr.

Apopka, FL 32703

407-772-4104

/maj

enclosures

ECALIARY OF STATE

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: As Always, A. (Name of Limited L.	17 Jave SERVICE LLC Liability Company)	
The enclosed Articles of Organization and fee(s) are sub-	mitted for filing.	
	concerning this matter to the following:	
MARY ANN	JONES	
(Nar	ne of Person)	
As Always,	JONES me of Person) At Your Service LLC m(Company)	<u>-</u>
(Fin	m Company)	
3426 GLOCCA 1	MORRA DR.	
	(Address)	
APOPKA F	L 32703 auc and Zip Code)	
(City'Ste	ate and Zip Code)	
For further information concerning this matter, please cal		
Mary Axix Jones at (Name of Person)	(Area Code & Daysime Telephone Number) AFF	04 OCT -5
	SEE, FLORIDA	5 PH 1: 55
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:	
As Always, AT Your	SERVICE LLC
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3426 GLOCCA MORRA Dr	3426 GLOCCA MORRAL APOPKA, FL 32703
APOPKA, FL 32703	APOPKA, FL 32703
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the regist	
MARY ANN Name 3426 Glocca	JONES_
3426 6 loca	Mores Dr Ba &
Florida street address (P.O. Box	
APOPEA City, State, and Z	FLORIDA 32703 SEE CF PL
Having been named as registered agent and to accept service company at the place designated in this certificate, I hereby a	ecept the appointment as registered agent and o
agree to act in this capacity. I further agree to comply with the and complete performance of my duties, and I am familiar wit	
registered agent as provided for in Chapt	ter 608, Florida Statutes
Marin an	n Jones
Registered Agent's Sign	nature

Page 1 of 2 (CONTINUED)

The name and address of each Manage	er or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	MARY ANN DNES 3426 GLOCCA MORRA DA ARDEKA FL 32703
MGR	GEDRGE A. JONES 3426 GLOCCO MORRA D. APOPRA FL 32703
-	
•	
(Use attachment if necessary)	

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

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.)

MARY AND JONES
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)