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TRANSMITTAL LETTER

FILED

04 OCT 29 AM 10: 42 Division of Corporations SUBJECT: (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: For further information concerning this matter, please call: (Area Code & Daytime Telephone Number) (Name of Person)

STREET ADDRESS:

TO:

Registration Section

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

FILED

The name of the Limited Liability Company is:	04 OCT 29 14 10: 1,2
PIERCE CONSTRU	UCTION STATE OF STATE
ARTICLE II - Address: The mailing address and street address of the princip	
Principal Office Address:	Mailing Address:
3118AW. Tharpe St. Tallahassee FL 32303	3118 A. W. Tharpe St Tallahassee FL 32303
Tallahassee FL 32303	Tallahassee FL 32303

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

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

ARTICLE I - Name:

Name

Florida street address (P.O. Box NOT acceptable)

Tallahassen si 323

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..

(CONTINUED)

ARTICLE IV- Man The name and address	a ger(s) or Managir ss of each Manager o	n g Member(s): or Managing Member is as	follows:	- 1';
<u>Title:</u> "MGR" ≈ Manager		Name and Address:	04 OCT 29	•
"MGRM" = Managin	ig Member	Michael C. 3118 A. W. The Tallahassec	Merce- whe st FL, 3230	ģi, rijāku: —— 73
(Use attachment if no				
		added if an effective dat	e is requested.	
REQUIRED SIGNA	e	or an authorized representati	ive of a member.	
·	of this document constitue hat the facts stated herein	on 608.408(3), Florida Statutes ites an affirmation under the pen are true.) Office of signee	the execution nalties of perjury	
	!	Filing Fees: \$100.00 Filing Fee for Article \$ 25.00 Designation of Regis \$ 30.00 Certified Copy (Opti \$ 5.00 Certificate of Status	tered Agent onal)	