## L04000085021

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate	es of Status	
Special Instructions to Filing Officer:			
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
•	0.
SUBJECT: H+L CONSTRUCTION (Name of	ON SERVICES, LLC TO 16
(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:
GEORGE M, HAVES (Name of Person)	~~************************************
(Name of Person)	
Hard CONSTRUCTION SERVE (Firm/Company)	ces, LLC
103 SW, ALOE CT (Address)	<del></del>
LAKE CITY FL 320 (City/State and Zip Code	124
For further information concerning this matter, ple	ease call:
(Name of Person)	at (386) 961-2375 (Area Code & Daytime Telephone Number)
osed is a check for the following amount:	
125.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations 409 E. Gaines Street	Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORII	OA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	
HAL CONSTRUCTION SERVICE	5,44C
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
103 SIW ALDECT, LAKECITY FL 32024	103 SIW ALDE CT. LAKE CITY FL 32024
ARTICLE III - Registered Agent, Registered Office,	& Registered Agent's Signature:
The name and the Florida street address of the registered GEORGE 12. HAYES Name	l agent are:
Florida street address (P.O. Box NO LAKE CTTY FL City, State, and Zip	Tacceptable)

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.

Registered Agent's Signature

(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 "MGRM" = Managing Member	Name and Address:
Marm	GEORGE M. HAYES 103 S. W. ALDE CT LAKECITY FL 32024
MGRA	MICHAEL D. LEEDOM 103 S.W. ALOECT, LAKE CITY FL 52024
Marn	SAMUEL HAYES 103 SW ALDE CT LAKECITY FL 32024
(Use attachment if necessary)	

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.)

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)