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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: FLORIDA TRACTOR SERVICE, (Name of Limited Liability Company)	LLC.	
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:	·	
MICHAEL MILLER (Name of Person)		
(Firm/Company)		
15551 RACE TRACK RD.		
O DESSA F. 33556 (City/State and Zip Code)		
For further information concerning this matter, please call:		
MICHAEL MILLER at (813) 695-6 (Name of Person) (Area Code & Daytime Telepho	one Number)	
Enclosed is a check for the following amount:		
(additional copy is enclosed) Co	ertificate of Status &	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallabasses Florida 32399 Tallabasses Florida 72399 Tallabasses Florida 72399	on rations	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLORIBA TRACTOR SERVICE, LLC. **ARTICLE II - Address:**

Mailing Address:

Principal Office Address:

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

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

JEAN-CHRISTOPHE CAMP Name Plorida street address (P.O. Box NOT acceptable)

TAMPA

FL 336//

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..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	MICHAEL A MILLER 15551 RACE TRACK RD ODESSA FL 33556
MGRM	JEAN-CHRISTOPHE CAMP 2953 WEST KNIGHTS AVE TAMPA R. 33611
(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:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)