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SEUNE JARY CHAILL TALLAHASSEE, FLORIDA

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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations  O5 FEL  SUBJECT: ALL SERVICE DRYWALL "L.L.C."  (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:	FILED 3-3 AM 9:41
SUBJECT: ALL SERVICE DRYWALL L.L.C. TALLAHA  (Name of Limited Liability Company)  The enclosed Articles of Organization and fee(s) are submitted for filing.	
The enclosed Articles of Organization and fee(s) are submitted for filing.	ARY UP STA
The enclosed Articles of Organization and fee(s) are submitted for filing.	SSEE, FLORID
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RICHARD HALE (Name of Person)	
(Name of Person)	
ALL SERVICE DRYWALL "L,L,C,"  (Firm/Company)	
1503 CAMBRIDGE DR (Address)	
(Address)	••
COCOA, PL. 32922 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
RICHARD HALG at (605) 212 · 1414  (Name of Person) (Area Code & Daytime Telephone Number)	
(Camb of a solid of a	
sed is a check for the following amount:	
25.00 Filing Fee	FF

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

## FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABBLETY3COMPANY

The name of the Limited Liability Company is:

SEUNCIARY OF STATE TALLAHASSEE, FLORIDA

ALL	JE RIVICE	DRYWALL	Nontracill
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### **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:	
1563 CAMBRIDGE DR	1503 CAMBRIDE DR	
COCOA, FL.	COCOA, PL,	
32922	32922	

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

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

RICHAR	D HATE	
	Name	
1503 C	AMBRIDGE	DR
Florida stre	et address (P.O. Box N	OT acceptable)
cos	COA , FL	32922
	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)

Title:	Name and Address:	05 FEB -3 AM 9:4	ı
"MGR" = Manager "MGRM" = Managing Member		SEUNCIARY DI STAT TALLAHASSEE, FLORI	
"MGR"	RICHARD HA	_	DΑ
MIGIK			
	1503 CAMBRU	37695	
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(Use attachment if necessary)		•	
NOTE. An additional auticle	at he added if an effective date i	a waawaata d	
NOTE: An additional article mu	st be added if an effective date i	s requested.	
REQUIRED SIGNATURE:			
10 1	. 1.0		
Nach	and Vole		
Signature of a me	mber or an authorized representative	of a member.	
	h section 608.408(3), Florida Statutes, th onstitutes an affirmation under the penal I herein are true.)		
RICHA!	ed HALE		
	Typed or printed name of signee		
	Filing Fees:		
	\$100.00 Filing Fee for Articles o \$ 25.00 Designation of Registere		
	\$ 30.00 Certified Copy (Options		

\$ 5.00 Certificate of Status (Optional)