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2005 JAN 26 A 3: 31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

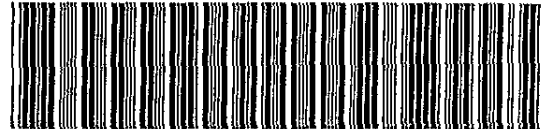
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TRANSMITTAL LETTER

TO: Registered Section  
Division of Corporations

SUBJECT: John Shaw Masonry, LLC

**FILED**  
2005 JAN 26 A 3:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing as follows:

John Shaw  
(Name of Person)

John Shaw Masonry  
(Firm Company)

2555 N. E. Chilton Road  
(Address)

Avon Park, FL 33825  
(City, State, Zip Code)

For further information concerning this matter, please call:

John Shaw at (863)452-0838  
(Name of Person) (Area Code) and daytime telephone number

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32314

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32399

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**FILED**  
2005 JAN 26 A 3:3  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

John Shaw Masonry, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

2555 N.E. Chilton Road  
Avon Park, FL 33825

**Mailing Address:**

2555 N.E. Chilton Road  
Avon Park, FL 33825

**ARTICLE III - Registered Agent, Registered Office, and Registered Agent Signature:**

John Shaw

Name

2555 N.E. Chilton Road

Avon Park, FL 33825

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. 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, Florida Statutes.

  
Registered Agent's Signature

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

**FILED**

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

**Title:**

**Name and Address;**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

"MGR" = Manager

"MGRM" = Managing Member

John Shaw, Mgr.

2555 Chilton Road  
Avon Park, FL 33825

Lesa C. Shaw, Mgr. M.

2555 Chilton Road  
Avon Park, FL 33825

(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 penalty of perjury that the facts stated herein are true).

John Shaw

Type or printed name of signee