## L05000014970

| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
| , , , , , ,                             |
| PICK-UP WAIT MAIL                       |
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|   |
| (Business Entity Name)                  |
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| (Document Number)                       |
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| Certified Copies Certificates of Status |
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PHYSICAL OF CORPORATIONS

ALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

| TO: Registration Se<br>Division of Con |                                |  | . <del>.</del>  |
|--|--------------------------------|--|---|
| SUBJECT: Sunland                       | Pest Control, LLC.             | J. Johille, Common   |   |
|  | (Name of Limite                | d Liability Company)   |   |
|  | Organization and fee(s) are s  |  |   |
| Please return all corresp              | ondence concerning this matte  | er to the following:   |   |
| Grenale j                              | Williams                       |  |   |
|  | (1                             | Name of Person)  | ¥ 2   |
|  |                                |  | Par B   |
| Sunland Pest Contro                    | ol, LLC                        |  | 日 部 四   |
|  |                                | Firm/Company)  | FEB -9 PM 1: 33 LLAI ASSEE, FLORID  |
|  |                                |  | <b>電</b>  |
| 370 South E                            | ast 3rd Avenue                 |  | 근용 :  |
| <u> </u>                               |                                | (Address)  | ORITIC  |
|  |                                |  | A SES   |
| South                                  | Bay, Florida 33493             |  |   |
| <del></del>                            | (City/                         | State and Zip Code)  | · - · · · · · · · · · · · · · · · ·   |
| For further information of             | concerning this matter, please | call:  |   |
| Grenale Williams                       |                                | at ( 561 ) 996-3448  |   |
|  | of Person)                     | (Area Code & Daytime To  | elephone Number)  |
| Enclosed is a check fo                 | r the following amount:        |  |   |
| ☐ \$125.00 Filing Fee                  |                                | ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|  | ET ADDRESS:                    | MAILING A Registration S   |   |

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

| ARTICLES OF ORGANIZATION FOR FLOR  | RIDA LIMITED LIABILITY COMPANY                   |
|--|--|
| ARTICLE I - Name: The name of the Limited Liability Company is:                                    | FILL FILE  |
| Sunland Pest Control, LLC.   | SERVE P  |
| ARTICLE II - Address: The mailing address and street address of the principal street.              | ipal office of the Limited Liability Company is: |
| Principal Office Address:  | failing Address:                                 |
| 370 S. East 3rd Ave, South Bay, FL 33493 37  | 70 SE 3rd Ave, South Bay, FL 33493               |
| ARTICLE III - Registered Agent, Registered Of The name and the Florida street address of the regis |  |
| Grenale Williams   |  |
| Name   |  |
| 370 South East 3rd Avenue  |  |
| Florida street address   | (P.O. Box NOT acceptable)                        |
| South Bay, FI  | 33493  |
| City, State, and Z   | Sip  |

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:

| MGR                          | Grenale Williams  370 South East 3rd Avenue  South Bay, Florida 33493 |               |
|------------------------------|---|---------------|
|                              | 370 South East 3rd Avenue   | a.            |
|                              | South Bay, Florida 33493  | <b></b>       |
| MGRM                         | Elvis Harvey  | Tr            |
|                              | 370 South East 3rd Avenue   |               |
|                              | South Bay, Florida 33493  | ,             |
| MGRM                         | Anthony Williams  | <u>ت</u><br>س |
|                              | 370 South East 3rd Avenue   |               |
|                              | South Bay, Florida 33493  |               |
|                              | ing sa                            | i:            |
|                              |   | · #s.         |
|                              |   |               |
| (Use attachment if necessary | λ   |               |

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.)

Grenale Williams

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)