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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations) * *
SUBJECT: DIAMOND ACRES LAND SCAPING, LLC (Name of Limited Liability Company) EIN 2	- 10-2321711
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Stephen Owens (Name of Person) Diamond Acres Land Scaping, LLC (Firm/Company) 4656 SE Winter Haven CT (Address) HOBE Sound FLA 33455 (City/State and Zip Code)	
for further information concerning this matter, please call:	OS HER
TARES H. OLIEN CPA at (772) 145-79 LL (Name of Person) (Area Code & Daytime Telephone Number)	FILED 05 NGA -1 ANTI: 53 TALLARDA BATTORIDA

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
DIAMOND ACRES LA	noscapino, LLC
ARTICLE II - Address: The mailing address and street address of the principal	
Principal Office Address:	Mailing Address:
4656 SE WINTER HAVEN CT	SAME
HOBE SOUND PC. 33455	
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered	& Registered Agent's Signature: d agent are:
CHEONEN OWE	
Name	1
4656 SE W. N-	HER HAVEN CT I I E
Florida street address (P.O. Box NO	OT acceptable)
HOBE SOUND FLO	d agent are: ST NS NER Haww CT Tacceptable) ORIDA 334157

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

The name and address of each Manager or Managing Member is as follows:		
<u>Title:</u> "MGR" = Manager "MGRM" = Managin	Name and Address: g Member	
MGR	Stephen Owens 4656 SE WINTER HAWN CT. HOBE SOUND, FC. 33455	
(Use attachment if neo	essary)	
REQUIRED SIGNA' Signature (In accorda of this doct	TURE: TURE: To a member or an authorized representative of a member. Ince with section 608.408(3), Florida Statutes, the execution ament constitutes an affirmation under the penalties of perjury its stated herein are true.) STEPHEN OWENS	

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

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)

Typed or printed name of signee