

L05000024071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

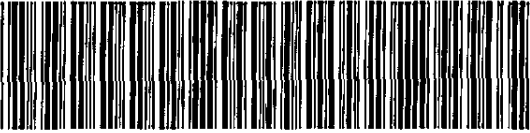
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE
4/1/05

03/10/05--01023--006 **130.00

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[Handwritten signature]

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GARVINE Auction & APPRAISAL LLC
(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:

WAYNE GARVINE
(Name of Person)

GARVINE Auction & APPRAISAL
(Firm/Company)

1217 Cook Mill Rd
(Address)

Bonifay Fl. 32425
(City/State and Zip Code)

For further information concerning this matter, please call:

WAYNE GARVINE at (850) 547-0448
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

WAYNE GARVINE
1217 COOK MILL RD
BONIFAY, FL 32425

MGRM

ELLIE GARVINE
1217 COOK MILL RD
BONIFAY, FL 32425

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

APRIL 1, 2005

REQUIRED SIGNATURE:

Wayne Garvine

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.)

WAYNE GARVINE

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)

STATE OF FLORIDA
TALLAHASSEE

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