## L05000039589

(Requestor's Name)	_
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Andy the Handy (Name of L	man LLC imited Liability Company)	<del></del>
The enclosed Articles of Organization and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Gilbert A. Boggs Tr	<u>.                                    </u>	
(Firm/Company)		
1119 Lasswade Dr (Address)	<del></del> _	
1119 Lasswade Dr (Address)  Tallahassee, FL 32. (City/State and Zip Code)	312	
For further information concerning this matter, plea	se call:	
	at ( )	
(Name of Person)	at () (Area Code & Daytime Telephone Number)	05.1
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	05 APR 22 PH
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
Andy the Handyman, LLC		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address:  Mailing Address:		
Same 1/19 Lasswale Sr		
Tallaharsee, FL 32312		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		
The name and the Florida street address of the registered agent are:		
Gilbert A, Boggs Jr		
1/19 Lasswade Dr Florida street address (P.O. Box NOT acceptable)		
Tallahassee, FL 32312 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)

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

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

Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM (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 penalties of perjury that the facts stated herein are true.) Gilbert A. Boggs Jr.
Typed or printed name of signee

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)