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IVINION OF CORPORATIONS

IVINION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Registration Se Division of Co			
SUBJECT:		ity TREE Service	
	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	ŧ
Please return all corresp	ondence concerning this matte	er to the following:	
	Thomas	s E. Hoover Sr.	
.	O	Name of Person)	
		luality TREE Service	
	(Firm/Company)	DIN COMPORATION OF PLOT
			PS (9
	1866 V	ictory Palm Drive	SERIES 2
		(Address)	- 12g r
			ORIGINAL S
	Edge	water, FL 32141	Transport The
	(City	/State and Zip Code)	• •
For further information	concerning this matter, please	call:	
Thomas I	E. Hoover Sr.	at (386) 424-0333	
(Name of Person)		(Area Code & Daytime To	elephone Number)
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STRE	EET ADDRESS:	MAILING A	DDRESS:
Registration Section		Registration Section	
Division of Corporations 409 E. Gaines Street		Division of Corporations P.O. Box 6327	
Tallahassee, Florida 32399		Tallahassee, Florida 32314	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:				
Hoover's Quality TREE Service Ltd. Co.				
ARTICLE II - Address:				
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
1866 Victory Palm Dr., Edgewater, FL 32141	1866 Victory Palm Dr., Edgewater, FL 32141			
	· .			
ARTICLE III - Registered Agent, Registered	d Office & Registered Apont's Signature			
	产资差型			
The name and the Florida street address of the	3 9 7			
Thomas E. Hoover Sr. Name				
	- P			
1866 Victory Palm Drive				
Florida street ad	Idress (P.O. Box NOT acceptable)			
Edgewater,321	41 _{FL}			
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.

y --------

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	Thomas E. Hoover Sr.			
	1866 Victory Palm Drive			
	Edgewater, FL 32141			
MGRM	Thomas E. Hoover Jr.			
<u> </u>	1866 Victory Palm Drive			
	Edgewater, FL 32141			
MGRM	Stephanie Y. Hoover			
	1866 Victory Palm Drive			
	Edgewater, FL 32141			
	(2)			
(Use attachment if necessary)				
NOTE: An additional article must be added if an effective date is requested.				
REQUIRED SIGNATURE:	RIDAS			
	Reference Control of the Control of			
Signature of a member or	an authorized representative of a member.			
(In accordance with section	a 608.408(3), Florida Statutes, the execution as an affirmation under the penalties of perjury			
Thomas E. Hoover Sr. 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)