L0500053534

-1418 blemagles Way - Rockledge H 32955					
			Kockledge	e H 32	155
		·			
(City/State/Zip/Phone #)					
PICK-UP		MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
Office Use Only					



05/23/05--01027--023 **125.00



A BRANN MAY 3 1 2005

ADVANCED TAX CENTRE A Firm of Enrolled Agents 3819 Murrell Road, Suite E, Rockledge, FL 32955

James A. Naff, EA* E. Ann Shroll, EA* Edward F. Chambers, EA Phone: (321) 636-8561 Fax: (321) 631-7208 E-Mailatc777@bellsouth.net

Wednesday, May 18, 2005

Department of State Division of Corporations P.O. Box 6327 Tallahassee FL 32314

Gentlemen:

Re: A Taylor Made Lawn Service, LLC David Ellis, Member Manager

Enclosed is an original and one (1) copy of the articles and intent to be a Limited Liability Company. Also enclosed is a check in the amount of \$ 125.00 for the filing fees and Registered Agent fee for this Limited Liability Company.

Please mail papers to:

Edith Ann Shroll Advanced Tax Centre, Inc. 3819 Murrell Road, Ste E Rockledge FL 32955

Thank you.

Yours truly, I le 9A~



E. Ann Shroll, EA

Enclosures: check LLC documents

> * Graduate Fellow of The National Tax Practice Institute Member: National Association of Enrolled Agents Member: National Society of Accountants Member: National Association of Tax Practitioners Licensed to Represent Taxpayers at all Administrative Levels of the Internal Revenue Service and State Department of Revenue.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name

The name of the Limited Liability Company is:

A TAYLOR MADE LAWN SERVICE, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

670 N Courtenay Parkway, Suite 17C Merritt Island FL 32953

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:



David Ellis Name

670 N Courtenay Parkway, Suite 17C Florida street and address (P.O. Box NOT acceptable)

______ Merritt Island_FI__32953_____ 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 <u>as</u> registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable.)

X The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company.

(An additional article must be added if an effective date is requested)

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.)

David Ellis

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)