

W050000071405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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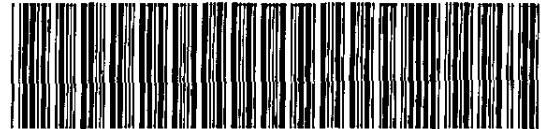
Certificates of Status \_\_\_\_\_

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M. HODGES

W05-32721

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RHINO TREE SERVICE  
(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:

RONALD P. HOGARTH  
(Name of Person)

T & H COMPTROLLERS, INC.  
(Firm/Company)

200 CAPRI ISLES BLVD.  
(Address)

VENICE, FL 34292  
(City/State and Zip Code)

For further information concerning this matter, please call:

RONALD HOGARTH at ( 941 ) 484-4980  
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

July 7, 2005

RONALD HOGARTH  
200 CAPRI ISLES BLVD.  
VENICE, FL 34292

SUBJECT: RHINO TREE SERVICE  
Ref. Number: W05000032771

We have received your document for RHINO TREE SERVICE and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 405A00045153

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

RHINO TREE SERVICE, 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:

2225 EWING DRIVE  
VENICE, FL 34292

SAME

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

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

T & H COMPTROLLERS, INC.

Name

200 CAPRI ISLES BLVD.

Florida street address (P.O. Box **NOT** acceptable)

VENICE FL 34292

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.*

By: Ronald P. Hogarth, Pres.  
Registered Agent's Signature  
RONALD P. HOGARTH

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

ANDREW BEDNARZ  
2225 EWING DR.  
VENICE, FL 34292

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Andrzej Bednarz  
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.)

ANDRZEJ BEDNARZ  
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)