## L05000073664

(Requestor's Name)		
	_	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Bu	isin <b>ess</b> Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Harry Der 5 (Name of Limited	Construction d Liability Company)	n LLC
The enclosed Articles of Organization and fee(s) are su	abmitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Harry Dees	Name of Person)	<del></del>
Harry Dees Con	57. Firm/Company)	
1937 Hoot OWI	17:11 Loop (Address)	<u> </u>
Tallahassee, FC	2 32317 State and Zip Code)	
For further information concerning this matter, please of	all:	
(Name of Person)	at ()(Area Code & Daytime Te	lephone 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:	MAILING AI	
Registration Section Division of Corporations 409 E. Gaines Street	Registration Se Division of Co P.O. Box 6327	rporations

Tallahassee, Florida 32399

Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is	s:
Harry Dees Const	truction LLC
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company i
Principal Office Address:	Mailing Address:
1937 Hoot Owl Hill Loap Talla, FL 32317	Same
ARTICLE III - Registered Agent, Register	ed Office, & Registered Agent's Signature:
The name and the Florida street address of the	registered agent are:
Harry De	ne SST 7
1937 Hoot Owl Florida street a	Address (P.O. Box NOT acceptable)  FL 32317
Tallahassee	FL 32317

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)

Page 1 of 2

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	HATTY Dees 1937 Hout ON Hill Copy Tallahasset, FL 32317
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Harr.	Dus-

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.)

Harry Der 5
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)

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