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TRANSMITTAL LETTER

Registration Section

TO:

STREET ADDRESS: MAILING ADDRESS:
\$\sqrt{125.00}\$ Filing Fee \(\text{Certificate of Status} \) \$\sqrt{125.00}\$ Filing Fee \(\text{Certified Copy} \) \$\sqrt{Certified Copy} \) \$\sqrt{(additional copy is enclosed)} \) \$\sqrt{Certified Copy} \) \$\sqrt{(additional copy is enclosed)} \)
Enclosed is a check for the following amount:
(Name of Person) (Area Code & Daytime Telephone Number)
Finanda Hebert at (353) 463-5997 (Name of Person) (Area Code & Daytime Telephone Number)
For further information concerning this matter, please call:
Chymate and Zip Code)
Trenton, FL 30693 The Code)
8600 SD 25th Ave.
Baxter's Tree Service
Marshall J. Baxter (Name of Person)
Please return all correspondence concerning this matter to the following:
The enclosed Articles of Organization and fee(s) are submitted for filing.
SUBJECT: Baxter's Tree Service (Name of Limited Liability Company)
Division of Corporations

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Baxter's Tree S	pervice LLC
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Slood SW 25th Ave Trenton, FL 32693	S600 SD 25th Ave Trenton, FL 32693
ARTICLE III - Registered Agent, Registere	d Office, & Registered Agent's Signature:
The name and the Florida street address of the	registered agent are:
Amanda	Hebert En E

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..

8600 SW 25th Ave Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature

(CONTINUED)

The name and address of ea	ch Manager or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Men	Name and Address:
MGR	Marshall J Baxter 8600 SW 25th Ave Trenton, FL 32693
MGRM	Amanda Hebert 8600 SW 25 th Ave Trenton, FL 32693
(Use attachment if necessary	у)
NOTE: An additional arti	icle must be added if an effective date is requested. 🚗 📑
(In accordar of this docu	nce with section 608.408(3), Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury acts stated herein are true.) Typed or printed name of signee
Ellina Franc	

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)

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