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(((H05000201459 3)))

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M. HODGES

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : HUBCO

Account Number: 104662003400 Phone: (516)935-3940 Fax Number: (516)935-3088 SECHETARY OF STATE

LIMITED LIABILITY COMPANY

Bobby Parker Concrete Work, L.L.C.

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Page Count	02
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ARTICLES OF ORGANIZATION FOR

FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: Bobby Parker Concrete Work, L.L.C.

ARTICLE II - Address

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

r medal Omee Address:	<u>Maung Address:</u>	
3261 N. Chameleon Pt. 3261 N. Chameleon Pt.		<u> </u>
Crystal River, FL 34428	Crystal River, FL 34428	
		·
ARTICLE III - Registered Agent, Registered Offi The name and Florida street address of the registered agent are Bobby Parke		F1L 05 AUG 23
Dobby 1 alke		5
	Name To	
3261 N. Char		± Ο ω
(P.O. Box or I	Mail Drop Box NOT Acceptable)	ختف
Crystal River	r, FL 34428	
(C	ity / State / Zip)	
iaving been named as registered agent and to accept serving the place designated in this certificate, I hereby accept the apacity. I further agree to comply with the provisions of all f my duties, and I am familiar with and accept the obligation hapter 608, F.S. Registered Agent's Signature.	he appointment as registered agent and agree to a Il statutes relating to the proper and complete per	act in this rformance

	V - Manager(s) or Managing Member(s): Address of each Manager or Managing Member is as follows:
Title: "MGR" = Man: "MGRM" = Ma	Name and Address: ager maging Member
MGR	Bobby Parker - 3261 N. Chameleon Pt., Crystal River, FL 34428
Use attachmen	t if necessary)
REQUIRED S	GIGNATURE:
	Signature of a member or 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.)
	Bobby Parker
	Typed or printed name of signes