# 105000094658

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)  (Document Number)
Certified Copies Certificates of Status
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M. HOUNES

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# **COVER LETTER**

то:	Registration Sec Division of Corp			
SUBJI	ECT:	F&SLAN	ID SERVICE, LLC	
		(Name of Limited	l Liability Company)	
The en	closed Articles of	Organization and fee(s) are su	abmitted for filing.	
Please	return all correspo	endence concerning this matte	r to the following:	
			IN J MERCER	
		(1	Name of Person)	
		F&SLAN	ND SERVICE, LLO	C
			Firm/Company)	
		Р(	D BOX 1563	
	(Address)			
		CALLAHA	N, FLORIDA 32	2011
			State and Zip Code)	
For fu	rther information c	oncerning this matter, please	call:	•
FRA	NKLIN J. N	MERCER	at ( 904 ) 759-39	00
		of Person)	at (904) 759-39 (Area Code & Daytime T	elephone Number)
Enclo	sed is a check for	r the following amount:		
\$12	5.00 Filing Fee	S130.00 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)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Centes Tallahassee, FL 32301	ons r Circle

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limite	d Liability Company is	:	
F & S LAND SERVIO		ted Company" or their abbreviation "LLC," or	"L.C.,")
ARTICLE II - Addres The mailing address and		rincipal office of the Limited Liabi	lity Company is:
Principal Office Addr	ess:	Mailing Address:	
36002 RUSTIC ACRES CALLAHAN, FLORIDA 3	<del></del>	PO BOX 1563 CALLAHAN, FLORIDA 32011	
ARTICLE III - Regist The Limited Liability Compan business entity with an active	ly cannot serve as its own Regis	d Office, & Registered Agent's Si stered Agent. You must designate an individua	l or another 전문
The name and the Flori	da street address of the	registered agent are:	SEP T
	FRANKLI	N J MERCER	3 5 F
	Name  36002 RUSTIC ACRES WAY  Florida street address (P.O. Box NOT acceptable)		
	36002 RUS	STIC ACRES WAY	150 F
	Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)	2 <b>2</b>
	CALLAHAN,	FL 32011	▶'
	City, State,	and Zip	
		accept service of process for the abo this certificate, I hereby accept the a	

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..

Franklin & Meure Registered Agent's Signature (REQUIRED)

> (CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	FRANKLIN J MERCER
	36002 RUSTIC ACRES WAYS
	CALLAHAN,FLORIDA 32011
MGRM	ROBERT SHANE PETTY
	45057 ZIDELL RD
	CALLAHAN, FLORIDA 32011
(Use attachment if necessary)	
IF V. Effective date if other than th	te date of filing: (OPTIONA

## **REQUIRED SIGNATURE:**

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.)

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)