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(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Cit	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
ertified Copies	Certificates of Status
Special Instructions to	Filing Officer:
Name Availability	
Document Examine	DCC Office Use Only
Sparer	LCC LCC
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EFFECTIVE DATE

31 & G 81 ASA 3037

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: ERIC'S EXCAVATING SERVICE (Name of Limited Liability Company)						
(Name of Elimited Elability Company)						
The enclosed Articles of Organization and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
ERIC H. WANNENWETSCH (Name of Person)						
ERICS EXCAUATING SERVICE (Firm/Company)						
18155 N.W. 24Th AU (Address)						
CITRA . CL. 32-113 (City/State and Zip Code)						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
(Name of Person) at (352) 017-5561 (Name of Person) (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
☐ \$125.00 Filing Fee. ☐ \$130.00 Filing Fee.	1					
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32314 Street/Courier Address Clifton Section Tallahassee, FL 32314	֧֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֓֝֝֓֓֓֓֝ <u>֚</u>					

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ERICS EXCAVATING SERVICE LLC
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE I - Name:

The name of the Limited Liability Company is:

The mailing address and street address of the principle.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
18155 N.W 24Th AU CITEM FL 32113	18155 N.W. 24Th AU CITRA FL. 32113
ARTICLE III - Registered Agent, Registered of The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
ERIC H. WANN Name	U ENWERSCH
CITRA FL.	ess (P.O. Box NOT acceptable)
City, State, an Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity.	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all
	formance of my duties, and I am fāṃiJiar with and tered agent as provided for in Chapter 608, F.S

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV	- Manager(s)	or Managing	Member(s):
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The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Mana "MGRM" = Ma		Name and Address:	
MGR		BLIC H. WANNENWETSCH 18155 N.W. ZYTH AU CITICH FL. 32113	·
(Use attachment	if necessary)	· · · · · · · · · · · · · · · · · · ·	
	sted, the date must be sp	te of filing: 11-10-05 (OPTION. pecific and cannot be more than five business da	
REQUIRED SI	GNATURE:		
	Signature of a member or (In accordance with section	r an authorized representative of a member.	
	that the facts stated herei	es an armination under the penantes of perjury	
30.000 20			

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)