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# **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: Marvin Orcutt Construction 2.6. (Name of Limited Liability Company)					
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Marvin Orcutt (Name of Person)					
Marcin Orcytt Construction LLC. (Firm/Company)					
84 BoBo J Road (Address)					
Crawforduille Florida 32327					
For further information concerning this matter, please call:  Maroin Orcy Hard (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$\text{\$125.00 Filing Fee}\$ \$\text{\$130.00 Filing Fee} & \text{\$25.00 Filing Fee} & \$25.00 Filin					

Mailing Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limi	ted Liability Co.	mpany is:		
Macuin	Orcult	Construction	2. L. C.	
		pany, "Limited Company" or their		
ARTICLE II - Addr	ess:			
The mailing address a	nd street addres	s of the principal office of	the Limited Liability Con	mpany is:
Principal Office Add	łress:	Mailing Addi	·224·	

**ARTICLE I - Name:** 

Timeipai Office Address	Maning Additess.			
Marviw Orcu:  84 Bo Bo J  Crawforduille  ARTICLE III - Register (The Limited Liability Company or business entity with an active Flo  The name and the Florida  Marviw Orcu:  84	ed Agent, Registered Office, & Registered Agent's Signannot serve as its own Registered Agent. You must designate an individual orda registration.)  street address of the registered agent are:  Name  Bobo J Road  Florida street address (P.O. Box NOT acceptable)	أند عنبلا	2006 JAN -9 AM 11: 21	77.17
Cr	Awforduille FL 32327 City, State, and Zip	, e .	1. 5	
	City, State, and Lip			

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 (REQUIRED)

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Marvin Orcytt  84 Boso J Road  Clawforduille Florida 32327
	SECRETARY OF STALLAHASSEE. FLO
(Use attachment if necessary)	RDA RDA
ARTICLE V: Effective date, if other than th	ne date of filing: (OPTIONAL) st be specific and cannot be more than five business days
Signature of a memb	oer or an authorized representative of a member.
of this document cons that the facts stated	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)  6. OrcaH  yped 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)