## L06000003586

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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, ,
(Document Number)
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SECRETARY OF STATE OF STATE OF CORPORATION



## **COVER LETTER**

TO: Registration Section Division of Corp				
SUBJECT: DEBB	TE DIG G	ARDEW MAIN I Liability Company)	TENANCE	,
The enclosed Articles of 6	Organization and fee(s) are su	ubmitted for filing.		
Please return all correspon	ndence concerning this matte	r to the following:		
	Debbie C	oldenberg Name of Person)	· · · · · · · · · · · · · · · · · · ·	<del></del> - 9.
De	bbit Digs Ga	oden Mainten Firm/Company)	anec	<del></del>
	9345 COV	EPOINT CIRC (Address)	16	Parameter (pair labor 1)
	BOYNTON !	RCH, PL. 334  (State and Zip Code)	37	20
	(City)	State and Zip Code)	•	17 SB
For further information co	oncerning this matter, please	call:		6- HYC SOUN
ROWALD (Name o	HERBST f Person)	at (56) 740 - 0 (Area Code & Daytime Te	1405 elephone Number)	2005 JAN -9 PM 12: 02
Enclosed is a check for	the following amount:			$\overline{\sim}$
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing I 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 Center ( Tallahassee, FL 32301	s	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DEBRITE DIES GARDEN MAINTENANCE 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:

Principal Office Address:	Mailing Address:	
9345 COVE POINT CITCLE BOYNTON, RCH, EL. 33437	SAME	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	stered Agent. You must designate an individual or another	2005 JAN
The name and the Florida street address of the in the same and the Florida street address of the in the same and the Florida street address of the interest address ad		JAN -9
9345 Cove Po	int Circle dress (P.O. Box NOT acceptable)	PM 12:
Fiorida street ad	dress (1.0. Dox 1102 deceptatio)	

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..

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member  Manager	Debbie Goldenberg 1345 Cove Point Circle Boynton Buckett. 33437
·	
enective date is listed, the date mus	
CLE VI Effective date, if other than effective date is listed, the date mus	the date of filing: (OPTIONAL)
ICLE VI Effective date, if other than effective date is listed, the date mus 90 days after the date of filing.)  REQUIRED SIGNATURE:	the date of filing: (OPTIONAL)

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)