Division of Corporations Public Access System

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TQ t

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC

Account Number : 0'
Phone : ()

: 075350000353 : (212)431-5000

Fax Number

(212)431-1441

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED D6 MAR 22 PH 3: 21 TS:ON OF CORPORATION

MANATEE CRANE SERVICE, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$125.00

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is	s:	
MANATEE CRANE SERVICE, LLC		
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liabili	ity Company is:
Principal Office Address:	Mailing Address:	
6109 36TH CT E ELLENTON, FL 34222	6109 36TH CT E ELLENTON, FL 34222	
ARTICLE III - Registered Agent, Registere	ed Office, & Registered Agent's Sig	matura 22
The name and the Florida street address of the	registered agent are:	\$6.55 C
GERRIE DONALDSON	ie :	E OF B
6109 36TH CT E		9: 39
Florida street ac	ddress (P.O. Box <u>NOT</u> acceptable)	Ď'
ELLENTON City, State,	FL 34222 , and Zip	

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:
GERRIE DONALDSON, REGISTERED AGENT

(CONTINUED)

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H060000766433

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

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

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	GERRIE DONALDSON	
	6109 36TH CT E	
	ELLENTON, FL 34222	_
MGRM	JOHN GERLACH	
	2322 16TH STREET WEST	_
•	PALMETTO, FL 34221	_
•		
		_
•		
•		_
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		_
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(Use attachment if necessary)		1
NOTE: An additional article mu	st be added if an effective date is requested.	
REQUIRED SIGNATURE:	•	
Chan.	· America	
Standard of a second	ther or an authorized representative of a momber.	
	and the control of th	

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)

GERRIE DONALDSON

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)

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