## LD600094671

(Re	questor's Name)	)
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

## COVER LETTER

TO: Registration S Division of C			
SUBJECT:	JOHN	GARGEAU LLe	
	(Name of Limite	d Liability Company)	
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
	JOHN	C. GARCKAU	
	(	Name of Person)	
	Business I	Willame Suvices	Ive
	-	(Firm/Company)	
	f. o.	Dox 2180 (Address)	
<del></del>		(Address)	
	GOLDEN	100 FL 32728	
	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Ja	Hell Gareen	-11 Hot \ 150 =	11 d-1
(Nam	4N C. GARCEAU e of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check f	or the following amount:		
\$125.00 Filing Fee	▼\$130.00 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	Street/Courier Address Registration Section Division of Corporatio Clifton Building	ns
	Tallahassee, FL 32314	2661 Executive Center	Circle

Tallahassee, FL 32301



September 19, 2006

JOHN C. GARCEAU P.O. BOX 2180 GOLDENROD, FL 32733

SUBJECT: JOHN GARCEAU, LLC Ref. Number: W06000041136

We have received your document for JOHN GARCEAU, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6853.

Letter Number: 506A00056109

Leslie Sellers Document Specialist

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	S:
(Must end with the words "Limited Liability Company, "Limited Liability Company," Limited Liability Company, "Limited Liability Company," Liability Company, "Liability Company," Liability Company, "Liability Company, "Liability Company," Liability Company, "Liability Compan	ALLC  ited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1265 S. Sanger Blod #1248 Wirrer Mak Fr 32792	P.O. Box 2180 Governmen Fr 32733
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Joffal C.	E GALLEAU
	ddress (P.O. Box NOT acceptable)
Wester fre	←FL 32792
City, State	, 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 (REQUIRED)

(CONTINUED) Page 1 of 2

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

Title:		Name and Address:	
"MGR" = Manag "MGRM" = Man		JOHN C. GARCEAN	
MGR		JOHN C. GARCEAN  1265 J. Janger BNJ. # 1248 WINTER PARK, FL 32792	<u>-</u> - -
			- - -
			- 
(Use attachment	if necessary)		
TICLE V: Effective on effective date is lise 90 days after the da	ted, the date must bate of filing.)	e date of filing: (OPTIC be specific and cannot be more than five business	ONAL) days prio
		Je C. Jane	
	Signature of a memb	er or an authorized representative of a member.	
	of this document cons that the facts stated		• •
		JOHN C. GARLEAU	
	17	yped or printed name of signee	<u>-</u>
Filing Fees:			9

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2