

L06000095687

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000240569 3)))



H060002405693ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : HUBCO
Account Number : 104662003400
Phone : (516)935-3940
Fax Number : (516)935-3088

FILED
06 SEP 29 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
06 SEP 29 PM 3:42
DIVISION OF CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO.**Florida Construction Services, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Florida Construction Services, LLC**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:Mailing Address:

6117 NW 116th Place

6117 NW 116th Place

Alachua, FL 32615

Alachua, FL 32615

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

The name and Florida street address of the registered agent are:

Jason E. Morphet

Name

2625 NW 49th Place

(P.O. Box or Mail Drop Box NOT Acceptable)

Gainesville, FL 32605

(City / State / Zip)

FILED
06 SEP 29 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 - Jason E. Morphet

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Jason E. Morphet- 2625 NW 49th Place, Gainesville, FL 32605

MGRM

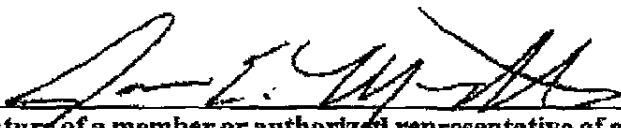
Patrick Jay Acree- 6117 NW 116th Place, Alachua, FL 32615

MGRM

Jason Derrell Brackett- 2625 NW 49th Place, Gainesville, FL 32605

(Use attachment if necessary)

REQUIRED SIGNATURE:


Signature of a member or authorized representative of a member.

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

Jason E. Morphet

Typed or printed name of signee

FILED
06 SEP 29 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA