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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL.
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

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## **COVER LETTER**

TO:	Registration Se Division of Cor					
SUBJE	СТ:	B.M.W. Lawn S	ervices, I			_
		(Name of Limite	ed Liability Compa	my)		
The end	losed Articles of	f Organization and fee(s) are s	submitted for filing	ζ.		
Please r	eturn all corresp	ondence concerning this matt	er to the following	:		
_		Matthew B. Ta		uire		
		l	(Name of Person)			
_		Mackey Law Gr	oup, P.A.			
			(Firm/Company)			
		1402 Third Av	zonue West			
-		1402 Initu Av	(Address)			
=		Bradenton, FI		:		AS:
		(City	//State and Zip Code	;)		돌紀
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ror turt	ner information	concerning this matter, please	cair:			ЩY 0
Ma	atthew B.	Taylor,	at / 941	746-6	225	Chetary of Stat Ahassee, Florii I
		of Person)	at ( 941 (Area Cod	e & Daytime T	elephone Number)	
						ъ
Enclos	ed is a check for	or the following amount:				
\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy	y	\$160.00 Filin Certificate of Sta Certified Copy (additional copy is of	atus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exc	ourier Addression Section of Corporation duilding secutive Centersee, FL 32301	ons r Circle	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

B.M.W. Lawn Services, LLC

(Must end with the words "Limited Liability Company, "Limited 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:	
356 Willow Lane	Post Office Box 188	
Ellenton, FL 34222	Ellenton, FL 34222	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address	wn Registered Agent. You must designate an indiv	idual or another OSECRETA
Matthew B.	Name	
	Avenue West street address (P.O. Box NOT acceptable)	AH II: 02 OF STATE FLORIDA
Bradenton	FL 34205	
City	State and Zin	

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:

UN (OD) 1 (	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Wade Carlton
<del></del>	356 Willow Lane
	Ellenton, FL 34222
MGRM	Barbara Carlton
- TOTAL	356 Willow Lane
	Ellenton, FL 34222
(Use attachment if necessary)	
•	e date of filing: (OPTI)
CLE V: Effective date, if other than the	<del>-</del>
CLE V: Effective date, if other than the effective date is listed, the date must b	<del> </del>
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CLE V: Effective date, if other than the effective date is listed, the date must b	<del> </del>
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CLE V: Effective date, if other than the effective date is listed, the date must b 0 days after the date of filing.)	<del> </del>
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:	be specific and cannot be more than five business
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member	er or an authorized representative of a member.
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member (In accordance with se	er or an authorized representative of a member.  ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of this document const	er or an authorized representative of a member.  ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury

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)