

L060000119003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

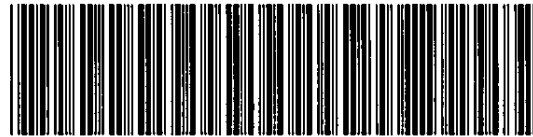
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



800082022208

EFFECTIVE DATE

01/01/07

12/14/06--01008--006 \*\*155.00

FILED

06 DEC 14 PM 12:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2006 DEC 14 PM 12:00

NOT FILED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

J. BRYAN DEC 14 2006

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: David Lewis Fence Builders L.L.C.  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David R. Lewis  
(Name of Person)

David Lewis Fence Builders L.L.C.  
(Firm/Company)

5850 Foxfield Trace  
(Address)

Tallahassee Fl. 32304  
(City/State and Zip Code)

For further information concerning this matter, please call:

David Lewis at ( 850 ) 545-1567  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |                       |  |  |  |
|-----------------------|--|--|--|
| ρ \$125.00 Filing Fee | ρ \$130.00 Filing Fee &<br>Certificate of Status | ρ \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | ρ \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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 Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Effective Date shall  
be 1-1-07

David Lewis Fence Buildings L.L.C.  
(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "LC,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

5850 Foxfield Trace  
Tallahassee FL 32304

Same

EFFECTIVE DATE  
01/01/07

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

David R. Lewis  
Name

5850 Foxfield Trace  
Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32304  
City, State, and Zip

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*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.,*

David Lewis  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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

David R. Lewis  
5850 Foxfield Trace  
Tallahassee FL 32304

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TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 01-01-07 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

David Lewis

Signature of a member or an 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.)

David Lewis

Typed or printed name of signer

**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)