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COVER LETTER

FO: Registration Section Division of Corporations

Affordable Custom Landscapes & Home Solutions LLC (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: Robert W. Groves (Name of Person) Affordable Custom Landscapes & Home Solutions (Firm/Company) 119 Villacrest Drive (Address) Crestview, FL 32536 (City/State and Zip Code) For further information concerning this matter, please call: Robert W. Groves (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: ☐ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Affordable Custom Landscapes & Home Solutions LLC	
(Must end with the words "Limited Liability Company, "Limited Company" or their abbrev	iation "LLC," or "L.C.,")
ARTICI F II - Address	

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

Principal Office	Address:	<u> Mailing Adoress:</u>			
Robert W. Groves		Robert W. Groves			
119 Villacrest Drive		119 Villacrest Drive			
Crestview, FL 32536		Crestview, FL 32536			
(The Limited Liability of business entity with an		ed Office, & Registered Agent's Signate an individual of registered agent are:	another	7M7 FEB 12 PM	
	Nam	e e	25		
	119 Villacrest Drive		===	23	
	Florida street a	ddress (P.O. Box NOT acceptable)			
	Crestview, FL 32536 City, State	FL , and Zip	•	4	

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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	Robert W. Groves	
	119 Villacrest Drive	
	Crestview, FL 32536	
MGRM	John S. Cannady	
	2802 Titleisf Ln	
	Crestview, FL 32539	
MGRM	Jeffrey T. Teasdale	
	101 Dogwood Lane	
	Crestview, FL 32536	•-
		* **
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		<u> </u>
(Use attachment if necessary)	220	TES T
(obtainment in moderally)	22	
ARTICLE V: Effective date, if other than the da	ate of filing: 9 February 2007 (OPTION	IAL)
	specific and cannot be more than five business d	avs prior
o or 90 days after the date of filing.)		
•	ORI CONTRACTOR ORI CO	: 23
		ω
<u>REQUIRED</u> SIGNATURE:		
11		

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.)

Robert W. Groves

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)