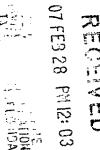
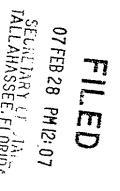


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	(Requestor's Name)	
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PICK-U	P WAIT	MAIL
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COVER LETTER

	on Section of Corporations	
SUBJECT: _	NATURE COAST SERVICES, LLC (Name of Limited Liability Company)	
The enclosed A	eles of Organization and fee(s) are submitted for filing.	
Please return al	prespondence concerning this matter to the following:	
	Wendy Russell Wiener, Esq. (Name of Person)	
	Mang Law Firm, P.A.	
<u></u>	(Firm/Company)	_
	660 E. Jefferson Street_	
	(Address)	-
	Tallahassee, FL 32301	
	(City/State and Zip Code)	
For further info	ation concerning this matter, please call: Hoover at (850) 222-7710 Name of Person) AREA Code & Daytime Telephone Number C	•
Kelli	Hoover at (850) 222-7710	
Englosed is a	Name of Person) (Area Code & Daytime Telephone Number Code & Cod	
	Fee XX \$130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION OF

NATURE COAST SERVICES, LLC

a Florida Limited Liability Company

ARTICLE I

The name of the Limited Liability Company is:

NATURE COAST SERVICES, LLC

ARTICLE II

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

NATURE COAST SERVICES, LLC

1400 Johnson-Stripling Road Perry, FL 32347

ARTICLE III

The mailing address for the Limited Liability Company is:

NATURE COAST SERVICES, LLC

1400 Johnson-Stripling Road Perry, FL 32347 07 FEB 28 PM 12: 07

ARTICLE IV

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

Wendy Russell Wiener, Esq. Mang Law Firm, P.A. 660 East Jefferson Street Tallahassee, Florida 32301

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

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ARTICLE V

The Limited Liability Company is to be member-managed. The name and address of the Member is:

Tommy Murrow 1400 Johnson-Stripling Road Perry, FL 32347

Tommy Murrow

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.

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