# W1000022157

(Re	questor's Name)	
(Ad	dress)	-
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>=</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



900089679049

02/28/07--01039--007 \*\*160.00

# **COVER LETTER**

TO:	Registration Se Division of Co						
SUBJI	ECT: Childs'	Construction Compar	ny, LLC			<del></del>	
		(Name of Limite	d Liability Compa	ny)			
The en	closed Articles of	f Organization and fee(s) are so	ubmitted for filing	<b>;.</b>			
Please	return all corresp	ondence concerning this matte	r to the following	;			
	William Ch	adwick Childs					
	*** **********************************	O	Name of Person)		- t	≓∽	<u>~</u>
	Childs' Con	struction Company,	LLC			ECR	07 F
			Firm/Company)		<del></del>	FIAS	- <del>C</del>
	500/ Mou	ntbatten Cove				RY (	28
	3554 MOU	inballer Cove	(Address)			77.	<u> </u>
			, ,			E A	12: 23
	Apopka, F		(0.4 12) - 0.1			Sim.	_;;
		(City	State and Zip Code	,			
For fu	rther information	concerning this matter, please	call:				
Willia	am Chadwicl	k Childs	at ( 407	484-006	1		
	(Name	of Person)		& Daytime To	elephone Number)	<del></del>	
Enclos	sed is a check fo	or the following amount:					
<b>□ \$</b> 12:	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy i	1	\$160.00 F Certificate of Certified Co (additional copy	Status &	દ
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division B Clifton B 2661 Exe	ourier Address on Section of Corporatio uilding cutive Center	ns Circle		

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	'is:	
Childs' Construction Company, LLC  (Must end with the words "Limited Liability Company, "Li	imited Company" or their abbreviation "LLC"	or"LC"
(mast one was are words ballows ballows) company, as	anion company of their above anion above	or Enougy
ARTICLE II - Address:		1 200
The mailing address and street address of the	e principal office of the Limited Lia	ibility Company is:
Principal Office Address:	Mailing Address:	LA!
		B 2 TAS
5994 Mountbatten Cove	5994 Mountbatten Cove	<u> </u>
Apopka, Florida 32703	Apopka, Florida 32703	
		<u> </u>
ARTICLE III - Registered Agent, Registe	red Office & Registered Agent's	Signature: N
(The Limited Liability Company cannot serve as its own Re		dual or another
business entity with an active Florida registration.)		
The name and the Florida street address of the	he registered agent are:	
William Chadwick Childs		
	me	
5994 Mountbatten Cove	•	
Florida street	address (P.O. Box NOT acceptable)	
Apopka, Florida 32703	FL	
City, Sta	ite, and Zip	
Having hear named as registered agent and	to good tomics of moses for the	aharra atata di limita d
Having been named as registered agent and liability company at the place designated		
registered agent and agree to act in this capa		
statutes relating to the proper and complete		
accept the obligations of my position as r	egistered agent as provided for in Cl	hapter 608, F.S
1 / 1		
Will		
Registered Agent's Sig	gnature (REOUIRED)	

(CONTINUED)
Page 1 of 2

3-5-07

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM"	William Chadwick Childs		
	5994 Mountbatten Cove		
	Apopka, Florida 32703		
	· · · · · · · · · · · · · · · · · · ·		
Sandy Market And Market And		·	
		SE TAL	
Use attachment if necessary)			
,,		FST.	

## **REQUIRED SIGNATURE:**

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.)

William Chadwick Childs

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)