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COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: E + 5	PATIERSON (Name of Limited	CONSTRUCTION 1 Liability Company)	/
The enclosed Articles of	f Organization and fee(s) are s	abmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
EDDIE +	Jill Patterson	/	
	C	Name of Person)	
E JA	ATTERSON CONS	Fruction UC	
	(Firm/Company)	
346 501	ninale CIR	HAUANA F/ (Address)	32333
HAVAN	A F1 30333 (City)	State and Zip Code)	
For further information	concerning this matter, please	call:	
EDDIE PAH	ecsa & of Person)	at (<u>850</u>) <u>539</u> - (Area Code & Daytime To	- 199 <u>0 on 5</u> 90 - 7849 elephone Number)
Enclosed is a check for	or the following amount:	\$ _	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
EST Patterson Cons (Must end with the words "Limited Liability Company, "Limited	5 + RUC+18 & LLC, d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2328 Holton St. Tallahassee, PL 32310	346 Scmnole CIR HAVANA FI 22333
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the re Edd/E L Paffer Name	ered Agent. You must designate an individual or another egistered agent are:
Name	SSET SSET
346 Seminole C Florida street add HAUAWA Fl City, State, a	tress (P.O. Box NOT acceptable)
liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

Registered Agent's Signature (REQUIRES)

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MBRM	JIII PAHEISON 346 SOMINOLE CIR HAVANA FL 32333
MER M	EDDIE PAHCISON JR 346 Saminole CIR HAVANA FI 32333
MGCM	CARLOS DICKAY 346 SOMINOTE CIR HAVANA FI 32333

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: March 93, 2007. (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:

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.)

EDDIE U. Parterson Jr.

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)