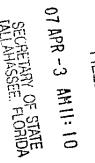
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COVER LETTER

Division of Corporations
SUBJECT: Avilez Lawn Service 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:
J. Cleofas Avilez Diaz
J. Cleofas Avilez Diaz (Name of Person) Avilez Lawn Service, LLC, (Firm/Company)
Hot 23 d St. E (Address) Ralmetto, M. 34221 (City/State and Zip Code) For further information concerning this matter, please call:
(City/State and Zip Code)
For further information concerning this matter, please call:
J. Cleofes Awilez Diaz at 941 720-4002 (Spanish on 14) (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certificate of Status \$\bigcup \\$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 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:

Aviler Lawn Service, LLC.
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
J. Cleofus Aviler Diaz 407 23rd St. E Pulmetto, M. 34221
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:
J. Cleofus Avilez Diaz
Name 407 23rd 5+. E Florida street address (P.O. Box NOT acceptable) Palmetto FL 34221 City, State, and Zip

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	J. Cleofas Avilez Diaz 407 23 St. E Pulmetto, M. 34221
MGRM	Luisa Avilez Pina 407 2320 St. E Pelmetto, Fl. 34221
	O7 N
(Use attachment if necessary)	O7 APR -3 FI
LE V: Effective date, if other than the fective date is listed, the date must l	e date of filing: (OPTIONATE OPTIONATE

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.)

as Avilez DiaZ 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)