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(Re	questor's Name)	
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SECRETARY OF STATE
TALL AHASSEF FLORIDA

COVER LETTER

TO: Registration Se Division of Con				
SUBJECT: Precis	ion Cuts & Mainten	ance, LLC	·	
	(Name of Limited	d Liability Company)		
	f Organization and fee(s) are so			
Jeffrey Co	orbett			
<u> </u>		Name of Person)		
Precision	Cuts & Maintenan	· · · · · · · · · · · · · · · · · · ·		<u> </u>
	(Firm/Company)		
216 Dixie	Drive E-4		ZS	0
		(Address)		3
Tallahass	see, FL 32304		5 7	N 554
	(City	/State and Zip Code)	7 to 1 to	
For further information	concerning this matter, please	call:	ELDRIO	
Jeffrey Corbett		at (850) 528-290	04	
	of Person)	(Area Code & Daytime To	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 Fe Certificate of Status & Certified Copy (additional copy is enclose	z
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporatio	_	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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:

Precision Cuts & Maintenance (Must end with the words "Limited Liability	Company, "Limited Company" or their abbreviation "LLC," or	(")
(Mass one War are Words Emmed Emornty	company, Ennice Company of men appreviation EEC, or	1.0.,)
ARTICLE II - Address:		
The mailing address and street ad	dress of the principal office of the Limited Liabi	ility Company is:
Principal Office Address:	Mailing Address:	
216 Dixie Drive E-4		
Tallahassee, FL 32304		
ARTICLE III - Registered Age	nt, Registered Office, & Registered Agent's Si	ignature:
ARTICLE III - Registered Age (The Limited Liability Company cannot serv business entity with an active Florida regist	e as its own Registered Agent. You must designate an individua	or another
(The Limited Liability Company cannot serv business entity with an active Florida regist	e as its own Registered Agent. You must designate an individua	07 APR 2
(The Limited Liability Company cannot serv business entity with an active Florida regist	e as its own Registered Agent. You must designate an individual ration.) ddress of the registered agent are:	O7 APR 23
(The Limited Liability Company cannot serve business entity with an active Florida regist) The name and the Florida street a	e as its own Registered Agent. You must designate an individual ration.) ddress of the registered agent are:	O7 APR 23 AH
(The Limited Liability Company cannot serve business entity with an active Florida regist) The name and the Florida street a	e as its own Registered Agent. You must designate an individual ration.) ddress of the registered agent are: ett Name	O7 APR 23 AH
(The Limited Liability Company cannot serve business entity with an active Florida regist.) The name and the Florida street a Jeffrey Corbo 216 Dixie December 1.15	e as its own Registered Agent. You must designate an individual ration.) ddress of the registered agent are: ett Name	07 APR 23 AM II OLLI AHASSEF FLO
(The Limited Liability Company cannot serve business entity with an active Florida regist.) The name and the Florida street a Jeffrey Corbo 216 Dixie December 1.15	e as its own Registered Agent. You must designate an individual ration.) ddress of the registered agent are: ett Name	O7 APR 23 AH

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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR MARC JOSEPH 415 N CHARLES WILLIS DR. Midway, FL 32343 MGR Jeffrey Corbett 216 Dixie Drive E-4 Tallahassee, FL 32304 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (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

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)

Jeffrey Corbett

that the facts stated herein are true.)

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