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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

### **COVER LETTER**

то:

Registration Section

Division of Co	rporations			
SUBJECT: Shavers & Johnson Landscaping L.L.C  (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:				
Shantel Mitchell				
(Name of Person)				
Shavers & Johnson Landscaping L.L.C				
	(1	Firm/Company)		
98 CR 30	02		7007 SEC	
		(Address)		
98 CR 302  (Address)  Bunnell, FL 32110  (Address)  AUG 17  AU				
<del></del>	(City/	State and Zip Code)	7º 0	
For further information concerning this matter, please call:			1: 19 STATE LORIDA	
Shantel Mitchell at 386 848-3900				
(Name	of Person)	(Area Code & Daytime Tele	ephone 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 Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:  Shavers & Johnson Landscaping L.L.C  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
98 CR 302 Bunnell, FL 32110	P. O. Box 2550 Bunnell, FL 32110			
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:				
Shantel Mitchell				
Name  98 CR 302  Florida street address (P.O. Box NOT acceptable)  Bunnell, FL 32110  City, State, and Zip				
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S			

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

## 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 Shantel Mitchell MGR 98 CR 302 Bunnell, FL 32110 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 09/01/07 \_. (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.)

#### Shantel Mitchell

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)