107000095461

(Re	questor's Name)		
(Address)			
(Ad	ldress)	<u> </u>	
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL MAIL	
(Business Entity Name)			
(Document Number)			
Certified Coples	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



000109117170

09/19/07--01024--022 **155.00

O7 SEP 19 PH 2: 11
SELINLINGS OF STANK

TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE
DIVISION OF CORPORATIO

B

COVER LETTER

TO: Registration Sec Division of Corp			ı
SUBJECT: SUA	State Cons	struction EN d Liability Company)	T. LLC
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.	
Picase return all correspon	ndence concerning this matte	er to the following:	
BRAI	NDON R	LANGLEY	
	(Name of Person)	
		, *	
		Firm/Company)	<u> </u>
3909	RESERVE	DK. #132	Z TALE OT
Tollohos	<u> </u>	(Address) 32311	SEP 19
	(City	/State and Zip Code)	P
For further information co	onceming this matter, please	call:	FL01
Brandon	· · · · · · · · · · · · · · · · · · ·	at (850) 980	-3592 -
(Name o	f Person)	(Area Code & Daytime Tele	ephone Number)
Enclosed is a check for	the following amount:		
\$125,00 Filing Fee	S130.00 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 Tailahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR F	LORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	FAST SER T
The name of the Limited Liability Company is	
SunState Construct	TION ENT. LLC SET P. T.
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3909 KISCAUL DV. #1322 Tollahasse FL 32311	3909 RESULUE Dr. #1322 Tollahassee FL 32311
Tollahassee FG 32311	Tollahaster FL 32311
	-
ARTICLE III - Registered Apart Registere	d Office & Desistored Ament's Signature

(The Limited Liability Company carnot serve as its own Registered Agent. You must designate an individual or another

The name and the Florida street address of the registered agent are:

business entity with an active Florida registration.)

S409 Regerof Dr., #1322

Florida street address (P.O. Box NOT acceptable)

FL Tollohosses, FL 32311

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

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Brandon R. Langley 3909 Reserve Dr. #1322 Tallahasset FL 32311
	7 SEP 19
(Use attachment if necessary)	SEE. FL
ARTICLE V: Effective date, if other than the d (If an effective date is listed, the date must be to or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	Luli

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.)

randon R. Langley
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 5.00 Certificate of Status (Optional)