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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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COVER LETTER ..

TO:

Registration Section

Division of Corporations
SUBJECT: T HERRON CONSTRUCTION, 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:
TERRY L HERRON
(Name of Person)
T HERRON CONSTRUCTION, LLC
(Firm/Company)
18975 180TH ST
(Address)
LIVE OAK, FL 32060
(City/State and Zip Code)
For further information concerning this matter, please call:
TERRY L HERRON at 386 776-2728
(Name of Person) (Area Code & Daytime Telephone Number)
That and in a short for the following emorate
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & \$\times \text{\$155.00 Filing Fee & \$\times \text{\$160.00 Filing Fee,} } \\ Certificate of Status & Certified Copy (additional copy is enclosed) 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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

T HERRON CONSTRUCTION LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

18975 180TH ST	٠.	18975 180TH ST	
LIVE OAK, FL 32060		LIVE OAK, FL 32060	

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:

TERRY L HERRO	DN	
N	ame	
18975 180TH ST	·	1.
Florida stree	t address (P.O. Box NOT acceptable)	
LIVE OAK,	_{FL} 32060	. \$3
City, St	ate, 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	·
William Willia	
MGR	TERRY L HERRON
	18975 180TH ST
	LIVE OAK, FL 32060
 	
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