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D. BRUCE

DEC 31 2007

EXAMINER

O7 DEC 31 PM I2: 15
SECKETARY OF STATE

COVER LETTER

Division of Corporations	
SUBJECT: MIKE WATSON SERVICES 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:	
MICHAEL WATSON (Name of Person)	
(Firm/Company)	
3221 N.73 TER.	
(Address)	
HOLLYWOOD, FL 33024 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
MIKE WATSON at (954) 214 -5886 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	ì

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

MIKE WATSON SE (Must end with the words "Limited Liability Compa	ERVICES LLC Dany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:	
Principal Office Address: Maili	ling Address:	
3221 N.73 TER	SAME	
HOLLYWOOD FL 33024		
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own Registered Agent business entity with an active Florida registration.)		
The name and the Florida street address of the registere	red agent are: TALL SEC	
KATHLEEN U	Of DEC 31	
3221 W. 73 Florida street address (P.C	O Day MOT accountable)	- 1
HOZLY WOODFL	<u> </u>	J

Rathleen Watson

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

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 Mo	Name and Address:
MGR	MICHAEL WATSON 3221 N.73 TER HOLLYWOOD, FL. 33024
MGRM	STEVEN WATSON 3221 N. 73 TER HOLLYWOOD, FG 33024
(Use attachment if necess	ary)
ARTICLE V: Effective date, if ot	her than the date of filing: (OPTIONAL) late must be specific and cannot be more than five business days prior
REQUIRED SIGNATUR	RE:
Signatur	Michael Calson e of a member or an authorized representative of a member
of this do	dance with section 608.408(3), Florida Statutes, the execution comment constitutes an affirmation under the penaltics of perjury facts stated herein are true.)
•	Typed or printed name of signee
Filing Fees: \$125.00 Filing Fee for Art of Registered Ag \$ 30.00 Certified Copy (0) \$ 5.00 Certificate of Sta	Optional)