## LU800011035

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
	_	

Office Use Only



700116000497

01/31/08--01001--011 \*\*160.00

B. KOHR

JAN 31 2008

**EXAMINER** 





www.pensonanddavis.com

Reply To:

ALBERT C. PENSON MARY ELLEN DAVIS JENNIFER L. SWEETING DONNAS. BIGGINS ADAM R. COWHEY

January 30 2008 VIA HAND DELIVERY ☐ 2810 REMINGTON GREEN CIRCLE TALLAHASSEE, FLORIDA 32308 TEL (850) 561 100 o FAX 350) 561-8030

P.O. BOX 1720 17 HIGH DRIVE, CRAWFORDVILL TEL (850) 926-6603

Department of State **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee Florida 32301

Re: Articles of Organization of Cantrell Excavating, LLC

Dear Sir or Madam.

Enclosed is an original and one (1) copy of the Articles of Organization of Cantrell Excavation, LLC. Also enclosed is a check in the amount of \$160.00 representing the \$125.00 filing fee, \$30.00 for the certified copy and \$5.00 for a Certificate of Status that will 🕬 such be picked up by our courier on January 31, 2008.

进入 医心线医膜下线

evaluation continues of the

Should you have any questions or require additional information, please contact me.

Sincerely.

فاصلانينا والرهاوا والمعا

Connie H. Shivers, C.P.

Certified Paralegal Penson & Davis, P.A.

ACP/chs "Enclosure(s)

医牙髓的 电多数控制设置

14 2015 AS (ML) 16 Sec. Sec. 2 8 4

the energy of the second of the control of the cont

## ARTICLES OF ORGANIZATION CANTRELL EXCAVATING, LLC

## A LIMITED LIABILITY COMPANY

(Pursuant to Chapter 608, Florida Statutes)

1. Name. The name of the limited liability company is:

CANTRELL EXCAVATING, LLC

- 2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.
- 3. Address of Principal Office. The street address of the principal office of the limited liability company is:

39 Schwall Road Havana, Florida 32333

4. <u>Mailing Address.</u> The mailing address of the limited liability company is:

P.O. Box 216 Havana, Florida 32333-0216

5. Members at Time of Formation. The name of each member at the time of formation:

Don Cantrell P.O. Box 216 Havana, Florida 32333-0216

- 6. **Period of Duration.** The period of duration shall be perpetual.
- 7. <u>Management.</u> Management of the Limited Liability Company at the time of formation is reserved for the managing member(s).



8. Registered Agent, Registered Office, and Registered Agents Signature. The name and the Florida Street address of the registered agent are:

Albert C. Penson 2810 Remington Green Circle Tallahassee, Florida 32308

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 provisional 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.

Albert C. Penson

9. **Effective Date.** The effective date of the limited liability company shall be:

January <u>30</u> 2008

Managing Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)