## L08000(6257

(Re	questor's Name)	)		
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	es of Status		
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SECRETARY OF STAN

## **COVER LETTER**

	Registration Section Division of Corporations				
SUBJECT: Chet Callahan Services (LC (Name of Limited Liability Company)					
The enclose	sed Articles of Organization and fee(s) are submitted for filing.				
Please retu	urn all correspondence concerning this matter to the following:				
	Chet Callahan				
	(Name of Person)				
	(Firm/Company)				
	4348 Blount Crk Ad				
	(Address)				
	Tall Fl 32310 59 7				
	(City/State and Zip Code)				
For furthe	er information concerning this matter, please call:				
Che	(Name of Person) at (#50) 574-67383 53 (Area Code & Daytime Telephone Number)				
Enclosed	is a check for the following amount:				
\$125.00	Filing Fee \$\Bigcup \\$130.00 \text{ Filing Fee & Box Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\Bigcup \\$160.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed)				
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Chet Callai	nan Ses	Vices	L.L.C	, 			
(Mu	st end with the words "I	Limited Liability	y Company, "L.l	C.," or "LLC.	")		
ARTICLE II - Ad The mailing addres		ss of the prir	ncipal office	of the Limi	ted Liability Co	mpany	y is:
Principal Office A	ddress:		Mailing Ad	dress:			
4348 Bl	ount Crk	Rd	Sal	ML			
Tall FL	32310					-	
ARTICLE III - Re (The Limited Liability Co	mpany cannot serve as ctive Florida registratio	its own Register n.)	red Agent. You n	nust designate a	gent's Signatur an individual or anoth	1 1 89 F80 1	
The name and the F	Florida street addr	ess of the re	gistered ager	nt are:	Y L	PH	
	Chet	Ca. llest	100		FLC:	ယ္	-
	4348	Blow	nt C	RK	RIDA A	59	
	Flor	ida street addr	ess (P.O. Box <u>I</u>	NOT acceptab	ole)		
	Jall		FL	323/6	>		

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

The name and address of each Manager of	or Managing Member is as follows:
Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member  MGR M	Chester Callahan 4348 Blown Coke Rd Taill Fl 18032310
<del></del>	
	THE BERN THE SERVICE OF THE SERVICE
	PH 33 C
(Use attachment if necessary)	Alternation
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing: (OPTIONAL) secific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a member of	an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated herei	n 608.408(3), Florida Statutes, the execution as an affirmation under the penalties of perjury
Filing Fees;	

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

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)