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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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**EXAMINER** 

## **COVER LETTER**

Division of Co			
<sub>subject:</sub> Doyle	Construction Serv	rices, LLC.	
50 <b>0</b> 000	<del></del>	ed Liability Company)	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
Philip E. C	Doyle III		
		(Name of Person)	
Doyle Co	nstruction Services	s, LLC.	
		(Firm/Company)	
6942 Orv	icti Court		
		(Address)	
Wesley C	hapel, FL 33544		
	(Cit	ty/State and Zip Code)	
For further information	concerning this matter, pleas	e call:	
Philip E. Doyle	e III	_at 813 929-6951 . FEE 200	er and Plates
(Nam	e of Person)	(Area Code & Daytime Telephone Number)	had distriction
Enclosed is a check f	or the following amount:	SSET A	2 martin
	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	Transfer of the same
	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 Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Doyle Construction Services, LLC.  (Must end with the words "Limited Liability)	ity Company, "L.L.C.," or "LLC.")	<del></del>	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited L	iability Company is:	
Principal Office Address:	Mailing Address:		
6942 Orvicti Court Wesley Chapel, FL 33544	6942 Orvicti Court Wesley Chapel, FL 33544		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)			
The name and the Florida street address of the r	egistered agent are:	2000 TAL	
Philip E. Doyle III		2000 MAR SECRET	
Name	·	R-3 PH 2: 00 ETARY OF STATE HASSEE, FLORID	
6942 Orvicti Court			
Florida street add	lress (P.O. Box <u>NOT</u> acceptable)	25.	
Wesley Chapel, FL 3	3544	2: 00 STATE STATE 1:08102	
City, State, a	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)

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

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

"MGR" = Mar "MGRM" = M	nager Ianaging Member	Name and Address:	
MGR		Philip E. Doyle III	
	<del></del> -	6942 Orvicti Court	
		Wesley Chapel, FL 33544	
MGRM		Melanie Miranda	
		6942 Orvicti Court	
		Wesley Chapel, FL 33544	
	<del></del>		
		<del></del>	
(Use attachmen	nt if necessary)		
•	• ,	date of filing: . (OPTIONA	AL)
CLE V: Effective feetive date is 0 days after the	ve date, if other than the listed, the date must be	date of filing: (OPTIONA e specific and cannot be more than five business day	
CLE V: Effective feetive date is 0 days after the	ve date, if other than the disted, the date must be date of filing.)	e specific and cannot be more than five business day	
CLE V: Effective feetive date is 0 days after the	ve date, if other than the clisted, the date must be date of filing.)  SIGNATURE:	e specific and cannot be more than five business day	
CLE V: Effective feetive date is 0 days after the	ve date, if other than the clisted, the date must be date of filing.)  SIGNATURE:  Signature of a member (In accordance with sec	ror-an authorized representative of a member. Extion 608.408(3), Florida Statutes, the execution statutes an affirmation under the penalties of perjury perein are true.)	ys prior
CLE V: Effective feetive date is 0 days after the	listed, the date must be date of filing.)  SIGNATURE:  Signature of a member of this document constitution.	ror-an authorized representative of a member. A settion 608.408(3), Florida Statutes, the execution statutes an affirmation under the penalties of perjury erein are true.)	ys prior

Filing Fees:

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

\$ 5.00 Certificate of Status (Optional)