

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : FASTKIT CORPORATE OUTFITS
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FILED
08 APR 14 AM 7:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CHEROKEE LAWN CARE AND LANDSCAPE LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

D. BRUCE

APR 14 2008

EXAMINER

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Corporate Filing Menu

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EFFECTIVE DATE

4-14-08

H08000095778 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CHEROKEE LAWN CARE AND LANDSCAPE LLC

(Must end with the words "Limited Liability Company," "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:

2954 SE 7TH ST

OCALA, FL 34471

Mailing Address:

2954 SE 7TH ST

OCALA, FL 34471

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:

WENDELL B MOZERT

Name

2954 SE 7TH ST

Florida street address (P.O. Box NOT acceptable)

Ocala

FL

34471

City, State, 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)

EFFECTIVE DATE 4-14-08

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Page 1 of 2

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08 APR 14 AM 7:47
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H08000095778 3

H08000095778 3

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

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

Title:

"MGR" = Manager

"MGRM" - Managing Member

Name and Address:

WENDELL B MOZERT

2854 SE 7TH ST

Ocala, FL 34471

MGRAM

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 04-14-2008 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Wendell B. Mozart
Signature of a member or an authorized representative of _____

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(1), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

WENDELL MOZERT

Typed or printed name of signer

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)

Page 2 of 2

H08000095778 3

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