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(Requestor's Name)				
(Address)				
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M. Thomas APR 25 2001

COVER LETTER

TO:	Registration Division of C			~	
SUBJE	CCT:	HEINZ LAND	DSCAPE +	IRRIGATION,	Ĺζ
The end	closed Articles	of Organization and fee(s) are s	ubmitted for filing.		
Please r	return all corres	pondence concerning this matte	er to the following:		
-	<u>-</u>	MATTHEW T	HEINZ Name of Person)		
-	HEINZ	LANDSCAPE	+ IRRIGA Firm/Company)	TION, LLC	
-	1454	Lioyo's C	(Address)	· · · · · · · · · · · · · · · · · · ·	
-	Total	94 HA.5EE, F (City	327/2	·	
For furt		concerning this matter, please	call:		
Ma	H Heid	e of Person)	at (<u>850</u>) <u>56</u> (Area Code & Daytin	75 - 97507	FILED 2: 52
Enclose	ed is a check f	or the following amount:		FLORI	D: 52
□ \$125.0	00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status	&
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Ad Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	n rations enter Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HEINZ	LANDSCAPE +	ty Company, "L.L.C.," or "LLC.")
(Mus	st end with the words "Limited Liabili	ty Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Add	lress:	
The mailing address	and street address of the pri	incipal office of the Limited Liability Company is
Principal Office Ac	ldress:	Mailing Address:
HEINZ LAN	DECAPE + IRRICATION DE CRUE FO.	Hein? Landsrape + RAFIGATION
Taxx 1454	LLOYDS COUR Rd	Hein? Landscape + MAIGATION
	FC 32312	Talkhassee, FC 323/2
business entity with an ac	orida street address of the re Mathew He Name 1954 Lloyo 5 Florida street addr	COVE ED Ress (P.O. Box NOT acceptable) SEE FLORIDA Ress (P.O. Box NOT acceptable)
_	Talla Cressee, City, State, an	<u>FL 373/2</u> d Zip
liability company registered agent and statutes relating to	e at the place designated in th l agree to act in this capacity. the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

The name and address of each Manager or Managing Member is as follows:						
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:					
MGRM	Matthew Heinz 1454 LLOYDS COLE Rd Tallahessel, EL 32312					
· · · · · · · · · · · · · · · · · · ·						
	OB AP					
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date	ASSE PARTY P					
	ecific and cannot be more than five business days prio					
REQUIRED SIGNATURE:						
Signature of a member or	an authorized representative of a member					
(In accordance with section of this document constitutes that the facts stated herein						
Typed o	r printed name of clopes					

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

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)