## L08000048595

(Requestor's Name)
(Address)
,
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Consideration of Fig. 200
Special Instructions to Filing Officer:
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Frank GAVE
AUTHORIZATION BY PHONE TO
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## **COVER LETTER**

Registration Section

Division of Corporations
SUBJECT: THE SHADE TREE CARPENTER (Name of Limited Liability Company)
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
· · · · · · · · · · · · · · · · · · ·
FRANK VAUSE
(Name of Person)
THE SHADE TREE CARPENTER (Firm/Company)
(Firm/Company)
1170 FIAT AND
4786 FERET LAWE (Address)
-
MILTON FLA 32570
(City/State and Zip Code)
For further information concerning this matter, please call:
FRANK R VAUSE at (850 ) 583-6696
FR ANK R VAUSE     at (850) \$83-6696       (Name of Person)     (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Bigsup \\$130.00 Filing Fee & B\\$155.00 Filing Fee & \$\Bigsup \\$160.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) Certified Copy
(additional copy is enclosed)
Mailing Address Street/Courier Address Registration Section Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301



May 6, 2008

FRANK VAUSE 4786 FERET LANE MILTON, FL 32570

SUBJECT: FRANK VAUSE THE SHADE TREE CARPENTER L.L.C.

Ref. Number: W08000022810

We have received your document for FRANK VAUSE THE SHADE TREE CARPENTER L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 108A00029000

Neysa Culligan Document Specialist

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
MTLION FLA 38570	MILTON FLA 32570
	₩ S S S S
	at and to accept service of process for the above stated limited

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) . (OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing. (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:**

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

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

FRANK R VACISE

Typed or printed name of signee

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)