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EXAMINER



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DIVISION OF CORPORATION

COVER LETTER

,	Division of Corporations
SUB.	JECT: The GREENS LAWN SERVICE
	(Name of Limited Liability Company)
The e	enclosed Articles of Organization and fee(s) are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
	Fredrick Bay Rose (Name of Person)
	The Greens Lawn Service (Firm/Company)
	1736 Country Terrace Lane
	Apopka, Florida 32703 (City/State and Zip Code)
For fu	arther information concerning this matter, please call:
	Fredrick Rose at (407) 756 - 9769 (Name of Person) at (407) Area Code & Daytime Telephone Number)
\X	osed is a check for the following amount: 5.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certified Copy} \text{\$Certified Copy} \text{\$Certified Copy} \text{\$Certified Copy} \text{\$(additional copy is enclosed)}
	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:
PRO Greens Work, 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: Mailing Address:
1736 Country Terrace LANE 1736 Country Torrace Apopha, FL. 32703 Apopha, FL 32703
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:
Yolanda Nash-Rose
Name S
1736 Country Terrace Lane &
Florida street address (P.O. Box NOT acceptable)
City, State, and Zip
N K
Having been named as registered agent and to accept service of process for the above stated mited 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
1 1 1 1 1 1 1 1

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

•	The name and address of each Manager or Managing Member is as follows:				
	<u>Title:</u> "MGR" = Manager	Name and Address:			
	"MGRM" = Managing Member	Fredrick R. Rose 1736 Country Terrace LANE ADODKA, FL. 32703			
	MGRM	Yolanda Nash-Rose 1736 Country Torrace LANE Apopea, Fr 32703			
					
	(Use attachment if necessary)				
(If an	CLE V: Effective date, if other than the date effective date is listed, the date must be spood days after the date of filing.)	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior			
	REQUIRED SIGNATURE:				
	The state of	BO.			
	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.)				
	FredRick Typed	or printed name of signee			
	Filing Fees:				

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

Page 2 of 2

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