

LD8 0000 87747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

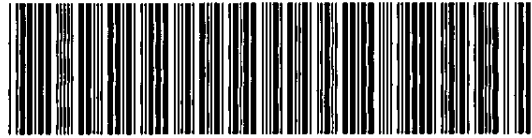
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SEP 16 2008

EXAMINER



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09/16/08--01025--001 \*\*125.00

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08 SEP 16 AM 11:45

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

08 SEP 16 PM 12:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

REGISTRATION SECTION  
DIVISION OF CORPORATIONS  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SUBJECT: TAMARGO CONSTRUCTION SERVICES, LLC  
The enclosed Articles of Organization and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

OSVALDO TAMARGO  
1912 WEST BURKE ST  
TAMPA FL 33604

For further information concerning this matter, please call:  
OSVALDO TAMARGO AT 813 401 5131

Enclosed is a check for \$125.00 for Filing Fee.

X   
OSVALDO TAMARGO

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Articles of Organization, TAMARGO CONSTRUCTION SERVICES, LLC  
Page 1 of 3

ARTICLE I - Name:

The name of the Limited Liability Company is:  
TAMARGO CONSTRUCTION SERVICES LLC.

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability  
Street Address:

Company is:  
TAMARGO CONSTRUCTION SERVICES, INC.  
1912 WEST BURKE STREET  
TAMPA FL 33604

Mailing Address:

Tamargo Construction Services, Inc.  
1912 West Burke Street  
Tampa FL 33604

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE III: Registered Agent, Registered Office, Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Osvaldo Tamargo  
1912 West Burke St  
Tampa FL 33604

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:

X *Osvaldo Tamargo*  
OSVALDO TAMARGO

ARTICLE IV: Manager or Managing Member:

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

TITLE:

MANAGING MEMBER

Name and Address of Managing Member:

OSVALDO TAMARGO  
1912 WEST BURKE ST  
TAMPA FL 33604

ARTICLE V: Effective date is the date of filing.

REQUIRED SIGNATURE:

OSVALDO TAMARGO  
MEMBER MANAGER

X Osvaldo Tamargo