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•	(Requ	estor's Name)	
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	(City/S	state/Zip/Phone	#)
PICK-	UP	WAIT	MAIL
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	(Docu	ment Number)	
Certified Copies		Certificates	of Status

Special Instructions to Filing Officer:

L. SELLERS

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EXAMINER

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COVER LETTER

10:	Division of Cor			
SUBJ	ECT: All Thi	ings are Possik	ole construction L	.L.C.
5020			ed Liability Company)	••
The er	closed Articles of	Organization and fee(s) are	submitted for filing.	
Please	return all correspo	ndence concerning this mat	ter to the following:	,
	Maurice S	Simmons		
			(Name of Person)	
	All Things	s are Possible	construction L.L.(C.
			(Firm/Company)	
	2023 Blai	r street	gerer Bakasa a	
		· · · · · · · · · · · · · · · · · · ·	(Address)	
	Jacksonv	ille Florida 322	206	
		, (Ci	y/State and Zip Code)	
75				,
For ru	rther information c	oncerning this matter, pleas	e caii:	
Mai	urice Simr	nons	at 904 755-6	353
	(Name o	of Person)	(Area Code & Daytime T	
Enclo	sed is a check for	the following amount:		
\$12 5	.00 Filing Fee [\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (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 Corporation Clifton Building 2661 Executive Center	as : Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPA

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А	RT	KJ.	ıĿ.	- 1	Na.	me:

The name of the Limited Liability Company is:

All Things are Possible construction L.L.C.

(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:
2023 Blair street	Post Office Box 13176
Jacksonville, Florida 32206	Jacksonville, Florida 32206

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:

Maurice Simmo	กร	
Na	me	
2023 Blair St.		
Florida street	address (P.	O. Box NOT acceptable)
Jacksonville	FL	32206
City, Sta	te, 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..

(CONTINUED) Page 1 of 2

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

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

nanager	Maurice Simmons
	2023 Blair St.
	Jacksonville Fla. 32206
manager	Terrance walker
	3071 northwest 44th St. apt. 3
	FT. Lauderdale, Florida 33309
Use attachment if necessary) EV: Effective date, if other than t	he date of filing: (OPTION. be specific and cannot be more than five business da

<u>REQUIRED</u> SIGNATURE:

Marvice finance.

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.)

Maurice Simmons

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)

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