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Office Use Only



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# **COVER LETTER**

то:	Registration Solvision of Co			
CI)D II	EAGLE	CONSTRUCTION	ON LLC	***
SUBJE	:CI:		ed Liability Company)	
		Organization and fee(s) are	-	
Please	return all correspo	ondence concerning this mat	ter to the following:	
	FRANKLY	N HERNANDEZ		
			(Name of Person)	
	EAGLE C	ONSTRUCTION	LLC	
			(Firm/Company)	
	7912 W. P	OCAHONTAS A	/E	
	-	** W- W-	(Address)	
	TAMPA, F	LORIDA 33	3615	
	<del></del>	(Cir	y/State and Zip Code)	
For fur	ther information (	concerning this matter, pleas	e call:	
FRA	NKLYN HE	ERNANDEZ	at (_813) 388-3081	
-	(Name	of Person)	(Area Code & Daytime Telep	hone Number)
Enclos	sed is a check fo	r the following amount:		
<b>□</b> \$125.	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 Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY							
ARTICLE I - Name:							
The name of the Limited Liability Company i	s:						
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")  ARTICLE II - Address:							
							principal office of the Limited Liability Company is:
						Principal Office Address:	Mailing Address:
7912 W. POCAHONTAS AVE	7912 W. POCAHONTAS AVE						
TAMPA, FLORIDA 33615	TAMPA, FLORIDA 33615						
TAMPA,	NTAS aVE address (P.O. Box NOT acceptable) FL 33615						
City, Stati	e, and Zip						
liability company at the place designated i registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered 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:

Member
FRANKLYN HERNANDEZ SR
7912 W. POCAHONTAS AVE
TAMPA, FL 33615
FRANKLYN HERNANDEZ JR
7912 W POCAHONTAS AVE
TAMPA, FL 33615
ALEXIS BATISTA
7912 W POCAHONTAS AVE
TAMPA, FL 33615
essary)
f other than the date of filing: (OPTIONAL de date must be specific and cannot be more than five business day filing.)
f

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.)

## FRANKLYN HERNANDEZ

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)

-SECULIA W 8: 29