## 409000045408

(Fr	Requestor's Name)
(A	(ddress)
(A)	ddress)
(C	City/State//p/Pnone♥)
PICK-UP/	WAIT MAIL
Z)	usiness Entity Name)
(C	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer
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Office Use Only



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## **COVER LETTER**

TO: Registration Se Division of Cor						
SUBJECT: 25	CONSTRU (Name of Lim	ction ited Liability Compan	LLC y)	· · · · ·		
The enclosed Articles of		_				
Please return all correspo	_	(Name of Person)		···		
		(Firm/Company)	,		<del></del>	
23011 N	ut-all Rise	(Address)	<u>.</u>	SECINE	09 MA	
Lamont	FL 3033(	2 ty/State and Zip Code)		HASSEE	Y I I AM I	
For further information co	ncerning this matter, pleas	e call:		FLORID.	¥ II : 0 t	Ö
Zach Stark (Name of	Person)	_at ( <u>\$50</u> )_ (Area Code &	566-40 to Daytime Teleph	0133	<del></del>	
Enclosed is a check for the \$125.00 Filing Fee		\$155.00 Filing	Fee & 🔲 \$	160.00 Fili	ing Fe	ee,
	Certificate of Status	Certified Copy (additional copy is	enclosed) (	Certificate ( Certified Conditional co	ору	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Clifton Buil	Section Corporations ding tive Center Circ	ile		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	is:	
25 construction (Must end with the words "Limited Lia	LLC bility 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:	
23011 Nutual Riso Rd Lamon+ FL 32376	11	<u> </u>
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registeres business entity with an active Florida registration.)	gistered Agent. You must desig	
The name and the Florida street address of the	registered agent are:	SSEE F
2301 Wut	au Rise Ro	大entable)
r iorida street a	ddress (P.O. Box <u>NOT</u> acc	eptable)

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..

egistered Agent's Signature (REQUIRED)

## The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) 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:** Sighalure 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.)

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

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Stalker
Typed or printed name of signee