

A1a Incorporation Service 1308 752811 p.  
**609 0000 55835**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000139177 3)))



H090001391773ABC4

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : CSH SERVICES, LLC  
Account Number : I20070C00160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

2009 JUN -9 AM 8:29  
**FILED**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**DECK SCAPES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

**T. CLINE**

JUN 10 2009

**EXAMINER**

Electronic Filing Menu

Corporate Filing Menu

Help

**RECEIVED**

09 JUN -9 PM 2:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

#.09000139177-3

**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I      NAME**

The name of the Limited Liability Company is:

DECK SCAPES LLC

**ARTICLE II      ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

1620 STAFFORD SPRINGS BOULEVARD  
MOUNT DORA, FLORIDA 32757**ARTICLE III      REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

A1A REGISTERED AGENT INC.  
5647 110TH AVENUE NORTH  
ROYAL PALM BEACH, FLORIDA 334112009 JUN -9 AM 8:29  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Having been named as registered agent 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.

*Timothy A. Makepeace*  
A1A REGISTERED AGENT INC. / Registered Agent's signature

#.09000139177-3

7-09000139177-3

PAGE 2 DECK SCAPES LLC

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS (optional)****MANAGING MEMBER**

ROBERT W WALKER

1620 STAFFORD SPRINGS BLVD

MOUNT DORA, FLORIDA 32757

**MANAGING MEMBER**

OSWALD H REID

1461 EDGEWATER DRIVE

MOUNT DORA, FLORIDA 32757

**MANAGING MEMBER**

KEVIN TECTOR

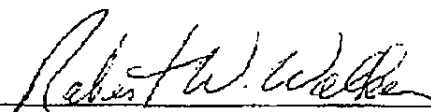
32325 OAK BLUFF DRIVE

SORRENO, FLORIDA 32776

2009 JUN -9 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

x



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.

ROBERT W WALKER

7-09000139177-3