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PICK-UP WAIT MAIL					
(Business Entity Name)					
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(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Office Use Only



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08/24/09--01061--018 **125.00

EFFECTIVE DATE 8 18 09

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ECRETARY OF STATE
ALLAHASSEE FI ORINA

B. KOHR
AUG 2 6 2009
EXAMINER

COVER LETTER

TO:	Registration S Division of Co					
SUBJI	ECT:	ETZIBA & BRO	THERS L	ANDSCA	PING, LLC	
			ted Liability Co			
		of Organization and fee(s) are			ECTIVE DATE 8 18 0	
		JOSE R	IVERA HEF	RNANDEZ	188 99 TAN	
			Name of Person		UG 24 LAMASS	
			Firm/Company	/	F197 3	
	P.O.BOX 1411			97		
			Address			
	ONECO, FL 34264 City/State and Zip Code					
		Ci	ty/State and Zip	Code		
		E-mail address: (to be used	for future annual	report notificati	on)	
For fur	ther information	concerning this matter, pleas	e call:			
		RA HERNANDEZ of Person	at (941 Area () Code & Daytime	932-1194 Telephone Number	
Enclos	sed is a check for	or the following amount:				
/ \$125.	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified	Filing Fee & Copy 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	Regis Divis Clifto 2661	et/Courier Add stration Section sion of Corpora on Building Executive Cen hassee, FL 323	ntions	

EFFECTIVE DATE 8 18 09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		100				
The name of the Limited Liability Company i	S:	最高立				
ETZIBA & BROTHERS I	ANDSCADING LLC	FILED M. 9. 1				
(Must end with the words "Limited Lia		" 声				
ARTICLE II - Address:		. F. O				
The mailing address and street address of the	principal office of the Limite	ed Liability Company is:				
Duinning LOSC and Address	Malling Adduses					
Principal Office Address:	Mailing Address:	, , , , , , , , , , , , , , , , , , ,				
2902 9TH ST E	P.O.BOX 1411					
BRADENTON, FL 34208	ONECO, EL 34264					
						
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regional business entity with an active Florida registration.)	ed Office, & Registered Ag istered Agent. You must designate an	ent's Signature: individual or another				
The name and the Florida street address of the	e registered agent are:					
JOSE RIVERA HERNANDEZ						
Name						
2902 9TH ST E						
Florida street address (P.O. Box NOT acceptable)						
BRADENTON	FL 34208					
City, State,						
		41				

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 (REQUIRED)

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:					
_M6B	JOSE RIVERA HERNANDEZ 2902 9TH ST E BRADENTON, FL 34208					
(Use attachment if necessary)	08/18/2000 (OPTIONAL)					
(If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing:08/18/2009 (OPTIONAL) ecific and cannot be more than five business days prior					
REQUIRED SIGNATURE:	Hernandez an authorized representative of a member.					
(In accordance with section of this document constitute	(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.)					
	JOSE RIVERA HERNANDEZ Typed or printed name of signee Filing Fees:					
\$125.00 Filing Fee for Articles of Organiza	tion and Designation					

of Registered Agent \$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)

Date of this notice: 08-18-2009

Employer Identification Number:

27-0758245

Form: SS-4

Number of this notice: CP 575 G

ETZIBA & BROTHERS LANDSCAPING LLC JOSE RIVERA HERNANDEZ SOLE MBR P O BOX 1411 ONECO, FL 34264

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 27-0758245. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub. Thank you for your cooperation.