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09 AUG 31 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Orlan SEP - 1 2009

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: ALL IN ONE FARM SERVICES LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE ESCOBAR

Name of Person

ALL IN ONE FARM SERVICES LLC

Firm/Company

10442 FLAT LAKE RD.

Address

CLERMONT, FL 34711

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE ESCOBAR

Name of Person

at (352) 557-1958

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 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 Circle
Tallahassee, FL 32301

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

FILED

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**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

ARTICLE I

The name of the limited liability company is:
ALL IN ONE FARM SERVICE LLC.

ARTICLE II

The mailing address and street address of the principal office of the limited liability company is:
10442 FLAT LAKE ROAD
CLERMONT, FLORIDA 34711

ARTICLE III

The purpose for which this limited liability company is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV

The registered agent of the limited liability company and his street address is:
JOSE GASPAR ESCOBAR
10442 FLAT LAKE ROAD
CLERMONT, FL 34711

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.

Registered Agent Signature:

JOSE G. ESCOBAR

ARTICLE V

The name and address of the managing member is:
JOSE GASPAR ESCOBAR, MGRM
10442 FLAT LAKE ROAD
CLERMONT, FL 34711

ARTICLE VI

The effective date for this limited liability company shall be September 1, 2009.

I affirm under the penalties of perjury that the facts stated herein are true to the best of my knowledge and belief.

JOSE G. ESCOBAR

JOSE GASPAR ESCOBAR, Managing Member
ALL IN ONE FARM SERVICES LLC

FILED

09 AUG 31 PM 2:09

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**