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SEP - 8 2009

EXAMINER

SECRETARY OF STA

COVER LETTER TO: Registration Section **Division of Corporations** SUBJECT: The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: PATRICIA J. Firm/Company 761 MARJON AVE.

Address

DUNEDIN, FL 34698

City/State and Zip Code

Pilanier@ Veri Zon. net For further information concerning this matter, please call: Enclosed is a check for the following amount: \$125.00 Filing Fee \$\int\$\$\$\$\$\$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street/Courier Address Mailing Address

> Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:						
Must end with the words "Limited Liability 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:					
761 MARJON AVE. DUNEDIN, FL 34698	761 MARJON AVE DUNEDIN, FL 34	<u>7</u> 8	3			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)						
The name and the Florida street address of the registered agent are: ATRICIA J. DAVICS Name						
Florida street address (P.O. Box NOT acceptable)						
DUNEDIN FL 34698 City, State, and Zip						
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						
Patricia) Javica	=	_			
Registered Agent's Signatu	pé (REQUIRED)	ALC AEC	99			
	/	≥湔	X			

(CONTINUED)

Page 1 of 2

ARTICLE IV	- Manager(s)	or Managing	Member(s):
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The name and address of each Manager or Managing Member is as follows:

	Name and Address:			
"MGR" = Manager "MGRM" = Managing Member				
MGR	PATRICIA J. DAVIES 761 MARJON AVE. PUNEDIN, FL 3+698			
MGRM	JANET D. BAHIREZ 761 MARJON AVE. DUNEDIN, FZ 34698			
 				
MACO CONTRACTOR CONTRA				
(Use attachment if necessary)	planta			
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be spe to or 90 days after the date of filing.)	of filing: $8/31/09$. (OPTIONAL) cific and cannot be more than five business days prior			
REQUIRED SIGNATURE:	J. Davies			
Signature of a member or an authorized representative of a member.				
of this document constitutes that the facts stated herein at				
TATRICIA Typed o Filing Fees:	r printed name of signee			
2107 00 PH F C A A A A A A A A	→			

 \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

. \$ 5.00 Certificate of Status (Optional)

FILED

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SECRETARY OF STAIL