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(Re	questor's Name)	
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EXAMINER

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## **COVER LETTER**

TO: Registration Division of	on Section Corporations	•		
Greg	Dean con	Struction		
SUBJECT:		ted Liability Company		
	•			
The enclosed Article	s of Organization and fee(s) are	submitted for filing.		•
Please return all corr	espondence concerning this mat	ter to the following:		
	Gregory H	Dean Name of Person		
-	_	Struction Firm/Company		
		termiili RD		
		Address		
·	Monticello F	1A 3234L y/State and Zip Code	1	
	1/4			_
		for future annual report notification)		
For further information	on concerning this matter, please	e call:		
Prog Q	QQ ne of Person	at ( S50 ) 519 ·	-5421 ephone Number	
Enclosed is a check	for the following amount:		74 00	
125.00 Filing Fee	* \$\bigcip\\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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 Corporation Clifton Building 2661 Executive Center ( Tallahassee, FL 32301	s En	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Greg

#### **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:
Truck	2495 water mill RD
	moticello FIA
	32344
	•

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

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..

(CONTINUED)

## Page 1 of 2

	<u>Title:</u> "MGR" = Manager "MGRM" = Managin	ng Member	Name and Address:		
	MGRM		Greg Dean 2495 Water Moticello	MIII RD F1 <del>1</del> 32344	
ARTIC: (If an ef		, if other than the date the date must be spe	of filing:ecific and cannot be more than		
	REQUIRED SIGNA	ATURE:			
		nature of a member or a	A QQQQ an authorized representative of a r	member.	
	Sign (In of	accordance with section of this document constitutes to the facts stated herein as	608.408(3), Florida Statutes, the exes an affirmation under the penalties of	ecution	can the same