

L10000042617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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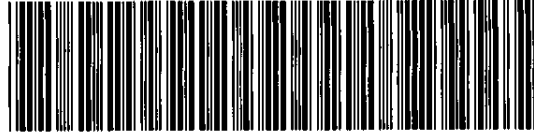
(Business Entity Name)

(Document Number)

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10 APR 21 AM 11:43

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

10 APR 21 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. O. O. APR 21 2010

April 20, 2010

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

SUBJECT: HODGE LAWN CARE, LLC.

To Whom It May Concern:

The enclosed Articles of Organization and fee are submitted for filing. Enclosed is a check for the following amount:

☒ \$125.00
Filing Fee

☐ \$130.00
Filing Fee
and
Certificate of Status

☐ \$155.00
Filing Fee and
Certified Copy

☐ \$160.00
Filing Fee,
Certified Copy, and
Certificate of Status

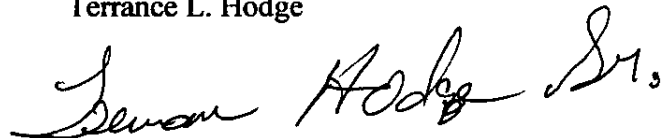
Please return all correspondence concerning this matter to the following:

Terrance L. Hodge
1601 Lake Ave.
Tallahassee, FL 32310

Sincerely,

Terrance L. Hodge

Enclosures

A handwritten signature in cursive script, appearing to read "Terrance L. Hodge Sr.", is written over the typed name.

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

ARTICLE I – Name:

The name of the Limited Liability Company is:

HODGE LAWN CARE, LLC.

ARTICLE II – Address:

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

Principal Office Address:

1601 Lake Ave.
Tallahassee, Florida 32310

Mailing Address:

1601 Lake Ave.
Tallahassee, Florida 32310

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

TERRANCE L. HODGE
1601 Lake Ave.
Tallahassee, FL 32310

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

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TALLAHASSEE, FLORIDA

ARTICLE IV – Managing Member:

The name and address of each Manager or Managing Member is as follows:

Title:

MGRM

Name and Address:

Terrance L. Hodge
1601 Lake Ave.
Tallahassee, FL 32310

ARTICLE V – Effective Date:

The Effective Date is the date of filing or April __, 2010.

REQUIRED SIGNATURE:


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.

TERRANCE L. HODGE
Typed or printed name of signee

DATED this 20th day of April, 2010.

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TALLAHASSEE, FLORIDA