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SECRETARY OF STATE
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J. BRYAN

APR 2 7 2009

EXAMINER

COVER LETTER

Division of Co	rnorations			. >
Division of Co	n porations			₩ 6 6 1
				FG 8
SUBJECT: C.O. Co				
	Name of Limit	ed Liability Comp	any	254
			•	10 APR 26 AM 8: US SECRETARY OF STATE SECRETARSSEE, FLORID
The enclosed Articles o	f Organization and fee(s) are	submitted for filin	ıσ	19 A 3
The chelosed Articles o	i Organization and rec(s) ac	suomittee for filli	·6·	FEST GE
Please return all corresp	ondence concerning this mat	ter to the followin	g:	
				₹"
Chase Lee O	rton			
<u> </u>		Name of Person		
C.O. Constru	ction IIC			
0.0. 00:13114	COOTI, LLO	Firm/Company	 	
		i in a company		
5317 Fruitvill	~ D4 #306			
2217 FIUITAII	e Ru., #200	Address		
		Address		
	0.4000			
Sarasota, FL				
	Cit	ty/State and Zip Cod	le	
chaseorton@				
	E-mail address: (to be used	for future annual rep	ort notification)	
Eas forther information	annonning this matter place	a aall.		
ror turuter information	concerning this matter, please	e can:		
			000 0040	
Chase L. Orton		at (_941	<u> 228-6312</u>	
Name of Person		Area Cod	le & Daytime Telep	phone Number
Enclosed is a check for	or the following amount:			
Eletacoo en en	D4 120.00 EH: E 0	Energe oo E'l'	r 6 5	#140.00 EU E
☑\$125.00 Filing Fee	Q\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili	_	\$160.00 Filing Fee, Certificate of Status &
	Centificate of Status	Certified Co	opy by is enclosed)	Certified Copy
		(auditional Co)	by is circlosed)	(additional copy is enclosed)
				· ···············
		سد. یعم		
	Mailing Address Pagintention Section		Courier Address tion Section	
	Registration Section Division of Corporations		uon Secuon 1 of Corporations	
	P.O. Box 6327		Building	•
	Tallahassee, FL 32314		ecutive Center C	Circle
		Tallahas	see, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	ty Company, "L.L.C.," or "LLC.") Ty Company, "L.L.C.," or "LLC.") Ty Company, "L.L.C.," or "LLC.")			
C.O. Construction, LLC.	Shirt I			
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
C.O. Construction, LLC.	C.O. Construction, LLC.			
5317 Fruitville Rd., #206	5317 Fruitville Rd., #206			
Sarasota, FL 34232	Sarasota, FL 34232			
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the recent chase Lee Orton				
Name				
1481 Kingsdown Dr.				
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)			
Sarasota	FL 34240			
City, Sta	te, and Zip			
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S			

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	APR 26 I
MGRM	Chase Lee Orton 5317 Fruitville Rd., #206 Sarasota, FL 34232	Y OF STATE
(Use attachment if necessary)		
LE V: Effective date, if other than the	e date of filing: be specific and cannot be more than five	(OPTIONAL e business days
3		
REQUIRED SIGNATURE:	le Ostar	
REQUIRED SIGNATURE: Signature of a memb	per or an authorized representative of a member and authorized representative of a member and affirmation under the penalties of perjudicities an affirmation under the penalties of perjudicities are true.)	n
REQUIRED SIGNATURE: Signature of a memb (In accordance with so of this document consthat the facts stated by Chase Lee Orton	ection 608.408(3), Florida Statutes, the execution attutes an affirmation under the penalties of perjudy	n

\$ 5.00 Certificate of Status (Optional)