L1000045923

(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600176981216

04/30/10--01001--002 **130.00

10 APR 29 PH 2: 10

OBJANTHUNI OF STATE
OBJANTHUNI OF STATE
OBJANTHUNI OF STATE
TALL AHASSEE, FLORIDA

MAPR 29 PM & 3

N. Octobra APR 2 9 2010

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJI	ECT: SunState Constructors LLC
	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Brandon Langling
	Name of Person
	Firm/Company
	901 Rissins Rd. #1025 Address
	` Address
	Tallahassic, FL 32308 City/State and Zip Code langleyb 700yahao.com E-mail address: (to be used for future annual report notification)
	City/State and Zip Code
	Famail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	at (
	Name of Person Area Code & Daytime Telephone Number
r i	and it is a shoot found of Callery in a second
_	ted is a check for the following amount:
] \$125.	00 Filing Fee \(\times \) \(\
	Mailing Address Street/Courier Address Positive Section Positive Section
	Registration Section Registration Section Division of Corporations Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassee Fl. 32314 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:

SunState Construc	tois LLC
(Must end with the words "Limited Liabilit	y 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:
901 Rissing Rd # 1025 Tallahassica PL 32308	901 Riggins Rd #1025- Tallahassic (FL 32308
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ared Agent. You must designate an individual or another
The name and the Florida street address of the real Brandon Langle	
901 Riggins / Florida street address (P.O. 1	24 # 1025 SSE
Tallalasses (P.O.) City, State, an	2K
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	ccept service of process for the above stated limited as certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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

Title:		Name and Address:	
"MGR" = Mana	ger naging Member		
MORM - Ma	naging Meinber	Brandon Langley	
marm		901 Rissins Rd H1028	
	_	Brandon Langley 901 Rissins Rd H1025 Tollahassec (FL 32308	
			
		•	
<u> </u>			
(Use attachment	if necessary)		
•	,	•	
RTICLE V: Effective	date, if other than the	date of filing: $4-29-10$. (OPTIONAL)	
f an effective date is lis	sted, the date must be	specific and cannot be more than five business days p	rior
or 90 days after the d		· ·	
DEOLUDED OF	ON A MOVED TO		
REQUIRED SI	GNATURE:	/	
	Lach	Zin	
	Signature of a member	or an authorized representative of a member.	
	_		
	of this document consti		A P
	that the facts stated here	tutes an affirmation under the penalties of perjury	373 9(3)
	1.Svene	ed or printed name of signee	17
	Тур	ed or printed name of signee	-
Filing Fees	į	ନ୍ଦ୍ର 🛴 🕻 🕽	
\$125.00 Filing F	Fee for Articles of Organ	ization and Decignation	
of Reg	istered Agent		
0.30.00.0	istereu Agent		
	ed Copy (Optional) cate of Status (Optional)		