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T. HAMPTON

MAY - 6 2010

EXAMINER

COVER LETTER

	egistration Section ivision of Corporations
SUBJECT	EARTH 2010, LLC Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	CARL LAYMAN
	Name of Person
	Firm/Company
	3350 YICKERS LAKE DR
	Address
	JACKSONVILLE FL 32224
	City/State and Zip Code
	E-glail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
<u> </u>	ARL LAYMAN at (818) 261 2194 Name of Person Area Code & Daytime Telephone Number
Enclosed	is a check for the following amount:
□\$125.00	Filing Fee \$\frac{1}{2}\$130.00 Filing Fee & Certificate of Status \$\frac{1}{2}\$ Certified Copy (additional copy is enclosed) \$\frac{1}{2}\$ \$\f
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:
3850 Vickers Lake	3850 Vickers Lake Dr.
TackONVIII & 37274	-tarcheany 11. F) 32224
Jairsonville 1 12 0 1000 1	JACASON III

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:

Name

Name

3850 VICKERS LAKE DR

Florida street address (P.O. Box NOT acceptable)

JACKONVILLE FL 32224

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

SEGRETAS DE STATE
DIVISION DE CERPORATIONS

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member MGRM" = Managing Member	CARL LAYMAN 3950 VICKERS LAWE DR. SACKSUNTILLE FLO 32224	

(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the constant of the last of the date must be to or 90 days after the date of filing.)	date of filing: (OPTIONAL) specific and cannot be more than five business days prior	
REQUIRED SIGNATURE:		
(In accordance with second of this document constitution)	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	
that the facts stated here	ein are true.)	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)