(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Chuty Name)			
(5. mar.)			
(Document Number)			
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T. HAMPTON JUN - 2 2010 EXAMINER

COVER LETTER

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Registration Section Division of Corporations

SUBJECT: Pan Ha	ndle Construction LLC		
	Name of Limi	ted Liability Company	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return ail corresp	pondence concerning this mat	tter to the following:	
Roy Toll			
		Name of Person	
Pan Handle (Construction LLC		
		Firm/Company	
4525 Arcadia	St.		
		Address	
Milton FI 3258	33		
	Ci	ty/State and Zip Code	
roytammy20@			
	·	for future annual report notification)	
For further information	concerning this matter, pleas	e call:	•
Roy Toll		at (850) 564-0671	•
Name	of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check for	or the following amount:		
☑\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

09 JUN -1 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 21, 2010

ROY TOLL 4525 ARCADIA ST MILTON, FL 32583

SUBJECT: PAN HANDLE CONSTRUCTION LLC

Ref. Number: W10000024969

We have received your document for PAN HANDLE CONSTRUCTION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L04000038811 (PANHANDLE CONSTRUCTION, LLC).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Letter Number: 210A00012947

Tammy Hampton Regulatory Specialist II

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the	Limited Liability Comp	any is:
Pan Hundle C	Must end with the words "Limit	Roy Toll Constituction LL (ted Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - A	Address:	
The mailing add	ress and street address o	f the principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
4525 Arcadia St.		4525 Arcadia St.
Milton,FI 32583		Milton,FI
(The Limited Liability business entity with a	Company cannot serve as its oven active Florida registration.)	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
		Name
	4525 Arcadia St.	
	Florida s	treet address (P.O. Box NOT acceptable)
	Milton	FL 32583

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

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

"MGR" = Manager "MGRM" = Managing Member "MGRM"	Roy Toll 4525 Arcadia St. Milton,Fl 32583
~ ~	4525 Arcadia St.
"MGRM"	4525 Arcadia St.
	4525 Arcadia St.
	Milton,FI 32583
	
·····	

(Use attachment if necessary)	
	the date of filing: (OPTIONAL)
	t be specific and cannot be more than five business days pric
90 days after the date of filing.)	
DECLUDED CLCM ATTER	
REQUIRED SIGNATURE:	
Signature offer men	ober or an authorized representative of a member.
-	<u>-</u>
(In accordance with	section 608.408(3), Florida Statutes, the execution
of this document co	nstitutes an affirmation under the penalties of perjury
Roy Toll	merem me side, j

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)

Typed or printed name of signee