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(Requestor	s Name)
(Address)	•
(Address)	
(City/State/Z	Zip/Phone #)
PICK-UP V	WAIT MAIL
(Business E	Entity Name)
(Document	Number)
Certified Copies Ce	ertificates of Status
Special Instructions to Filing Of	ficor

Special Instructions to Filing Officer:

A. LUNT

JUN 22 2010

EXAMINER

Office Use Only



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COVER LETTER

1	1	то:	Registration Section Division of Corporations

SUBJECT: Chuck Howard Construction Services, LLC Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Chuck Howard Name of Person Chuck Howard Construction Services, LLC Firm/Company 95375 Bermuda Drive Address Fernandina Beach, FI 32034 City/State and Zip Code chuck.howard@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Chuck Howard 557-1637 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: □\$125.00 Filing Fee **□**\$130.00 Filing Fee & □\$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A.L.

y, "L.L.C.," or "LLC.")
ffice of the Limited Liability Company is:
g Address:
Bermuda Drive
ndina Beach Fl 32034
& Registered Agent's Signature: You must designate an individual or another agent are: Box NOT acceptable)

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..

Cluck Howar Q

Registered Agent's Signature (REQUIRED)

(CONTINUED)
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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGR	95375 Bermuda Drive Fernandina Beach, Fl 32034		
		2018 Jun	
<u> </u>		21 PM 2:	
(Use attachment if necessary)	**************************************	EN G	
ARTICLE V: Effective date, if other than (If an effective date is listed, the date mus to or 90 days after the date of filing.)	the date of filing: June 20, 2010 t be specific and cannot be more than t	(OPTIONA five business day	L) 's prior
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.)

Chuck Howard

Typed or printed name of signee

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)