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T. CLINE JUL 12 2010

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Amei	Name of Limited	Services Liability Company	
The enclosed Articles of	Organization and fee(s) are su	bmitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
Micha	el L. Back	Le lame of Person	
Americ	an Mowing	Services im/Company	
/289 W	i'lliams Lau	nding Rdi Address	
Tallaha	SSee FL City/S	32310 State and Zip Code Of May Good Code Stuture annual report notification)	
Mike 1	E-mail address: (to be used for	Sture annual report notification)	Oh
For further information co	oncerning this matter, please c		_
Michael Be Name of	acke a	at (<u>750</u>) <u>574 –</u> Area Code & Daytime Telep	4986 hone Number
Enclosed is a check for	\		10 JUL
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		\$160.00 Filing Fee. Certificate Cox Status & Certified Copy (additional eppy is encosed)
	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 Ci Tallahassee, FL 32301	30 AIE RIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name	of the Li	imited Lia	ibility C	Company is:		
1	ſ	ıU	1	1	110	•

(Must end with the words Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

1209 Williams Landing Kdi Tallaha 9500, FL 32310	1289 Williams Canding Ed,
TATIANUSSE, HE 30,310	Tallahassee, H. 52310
ARTICLE III - Registered Agent, Registered	
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent, You must designate an individual or another
The name and the Florida street address of the r	registered agent are:
MCI I D.	L2 5 5

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

Title: "MGR" = "MGRM"	Manager = Managing Member	Name and Address:
MGRM		Michael Backe 1287 Williams Landing Rd, Talla hassee, FL 32310
<u> </u>		
FICLE V: Effi n effective dat	nment if necessary) ective date, if other than the is listed, the date must	he date of filing: 2//2/10 (OPTIONAL) be specific and cannot be more than five business days prior
FICLE V: Effortive dates 190 days after		he date of filing: 7/2/10 . (OPTIONAL) be specific and cannot be more than five business days prior
FICLE V: Effortive dates 190 days after	ective date, if other than the is listed, the date must the date of filing.)	he date of filing: 2//2/10 . (OPTIONAL) be specific and cannot be more than five business days prior
FICLE V: Effortive dates 190 days after	ective date, if other than the is listed, the date must the date of filing.) ED SIGNATURE:	aber or an authorized representative of a member.
FICLE V: Effortive dates 190 days after	ective date, if other than the is listed, the date must the date of filing.) ED SIGNATURE: Signature of a mem (In accordance with of this document corthat the facts stated)	aber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)