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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

JUL 1 9 2010

**EXAMINER** 

## **COVER LETTER**

TO:

Registration Section

Division of C	orporations		
SUBJECT: Blackbu	urn Landscaping LLC.		
	Name of Limit	ed Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
Woody T. Bla	ackburn		
		Name of Person	
Ironwood Pro	aduationa Ina		
HOHWOOD PIC	oductions, Inc.	Firm/Company	- E
		· · · · · · · · · · · · · · · · · · ·	
2905 Corinth	ian Avenue, Suite 6		AS
		Address	SSEE. OF IT
	=		FOR B
Jacksonville,		y/State and Zip Code	
		y/State and Zip Code	SS DRID
w.blackburn@	Done-more-cast.com E-mail address: (to be used)	for future annual report notification)	<u> </u>
		·	
For further information	concerning this matter, please	e call:	
Brian Blackburn		at ( 904 ) 303-2511	
Name	of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check f	or the following amount:		
■\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ 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 P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	ny is:	
Blackburn Landscaping LLC.		
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
2905 Corinthian Avenue	2905 Corinthian Avenue	
Suite 6	Suite 6	
Jacksonville, FL 32210	Jacksonville, FL 32210	
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	n Registered Agent. You must designate an indivi	dual or another
Woody T. Blackburn		ECF O
Name		
4585 Carrara Court		FILI 10 JUL 16 I SECRETARY C LLAHASSEE
Florida str	eet address (P.O. Box <u>NOT</u> acceptable)	PH 1:55 OF STATE E. FLORID
Jacksonville	FL 32224	I:53
C	City, State, and Zip	<b>€</b> ₩ <b>3</b>
Having been named as registered agent a	nd to accept service of process for the	

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

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; "MGRM" = Mai					
	luging Wolffoer				
MGRM		Warren Blackburn			
		4585 Carrara Court		_	
		Jacksonville, FL 32224			
MGRM		Brian Blackburn		_	
	_	10075 Gate Parkway North, #308		_	
		Jacksonville, FL 32246	<u> </u>		
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	sted, the date must b	date of filing:e specific and cannot be more than five	(OPT) e busines		,
<u>REQUIRED</u> SI	GNATURE:	Wash_			
	Signature of a member	er or an authorized representative of a mem	ber.		
	of this document const that the facts stated her warren &	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjuring are true.)  Sackburn  The printed name of signee	on jury		
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)