110000096126

(Requestor's Name)
(Address)
, ,
(411
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
1
(Durings Fath Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500185272055

09/13/10--01013--014 **130.00



S. HAWKES

SERVIT 4 2010

EXAMINER

COVER LETTER

TO:	Registration Division of C			
SUBJI	CT: Howard	LaDuke's Rescreen &	 	
		Name of Limi	ted Liability Company	
The en	closed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this mat	ter to the following:	
	Howard LaDi	uke		
			Name of Person	
			Firm Company	
	15225 NE146	Sth Ct		
			Address	
	Ft. McCoy, Fl	L 32134		
•		Cit	y State and Zip Code	
	heladuke@ho			
-		E-mail address: (to be used to	for future annual report notification)	
For furt	her information	concerning this matter, please	e call:	
Howa	rd LaDuke		at (352) 509-4048	
	Name	of Person	Area Code & Daytime Telep	hone Number
Enclos	ed is a check fo	or the following amount:		
□\$ 125.0	00 Filing Fee	2\$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 P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C. Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Co	
Howard LaDuke's Rescreen &	
	Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street addre	ss of the principal office of the Limited Liability (2) apan (3):
Principal Office Address:	Mailing Address:
15225 NE 146th Ct	15225 NE 146th Ct
Ft. McCoy, FL 32134	Ft. McCoy, FL 32134
Howard LaDuke	
	Name
15225 NE 146th	
Flor	ida street address (P.O. Box <u>NOT</u> acceptable)
Ft. McCoy,	FL 32134 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

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		
MGR	Howard LaDuke	_
	15225 NE 146th Ct	Ą
	Ft. McCoy, FL 32134	SE.
	\frac{1}{2}	4.
		- 4
		ig". 1977
		1 - 1
		37
	51	
(Use attachment if necessary)		
· · · · · · · · · · · · · · · · · · ·		
CLE V: Effective date, if other tha	an the date of filing: (OPTIONAL)
effective date is listed, the date m O days after the date of filing.)	ust be specific and cannot be more than five business days	pri

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.)

Howard LaDuke

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)