## L10000104880

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(business Entity Name)
(Document Number)
•
Certified Copies Certificates of Status
•
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EFFECTIVE, DATE

SECRETARY OF STATE

## **COVER LETTER**

TO:

**Registration Section** 

Division of C	orporations						
S C T	Construction Consises						
SUBJECT: S. C. 1	SUBJECT: S. C. T. Construction Services LLC  Name of Limited Liability Company						
The enclosed Articles of	of Organization and fee(s) are	submitted for filin	g.				
Please return all corres	pondence concerning this mat	ter to the following	g:				
Stephen Chri	istopher Todd						
<del></del>		Name of Person					
S.C.T, Constr	uction Services LLC						
	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	Firm/Company					
4947 Bir resort	Detico						
1217 Murray	DUAG	Address					
Jacksonville,							
		y/State and Zip Cod	e				
sexysteve73	Dyahoo.com  E-mail address: (to be used to	for future annual ren	ort notification)				
For further information	concerning this matter, please	-	on nouncestry				
	•						
Krista Todd		_ at (_904	) <b>554-6079</b>				
Name	of Person	Area Code & Daytime Telephone Number					
Enclosed is a check for	or the following amount:						
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filir Certified Co (additional cop	ру	\$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	Registrat Division Clifton B 2661 Exe	ourier Addression Section of Corporations duilding ecutive Center Coee, FL 32301				

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is	:	
S.C.T. Construction Services LLC,		_
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	-
ARTICLE II - Address:		
The mailing address and street address of the p	orincipal office of the Limited Liability (	Company is:
Principal Office Address:	Mailing Address:	
1217 Murray Dr	1217 Murray Dr	
Jacksonville, Fl 32205	Jacksonville, Fl 32205	· -
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regi business entity with an active Florida registration.)  The name and the Florida street address of the Krista L. Todd  Name	stered Agent. You must designate an individual or and registered agent are:	
1217 Murray Dr		R R R
	dress (P.O. Box <u>NOT</u> acceptable)	STATE ORATIO
Jacksonville	FL 32205	<b>3 3 5 7</b>
City, S	tate, 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing !	Name and Address:	
MGR	Stephen Christopher Todd	
	1217 Murray Drive	_
	Jacksonville, Fl 32205	_
	ara	<u>-</u>
	· · · · · · · · · · · · · · · · · · ·	<del>-</del> -
		- -
	- And	- -
(Use attachment if necessary ARTICLE V: Effective date, if	other than the date of filing: October 4, 2010 OPTIO	ONAL)
(If an effective date is listed, the to or 90 days after the date of fi	e date must be specific and cannot be more than five business iling.)	DIV.
REQUIRED SIGNATU	Stephen C. Josh	SECRETARY OF ISION OF CORP
Signati	ure of member or an authorized representative of a member.	
	ordance with section 608.408(3), Florida Statutes, the execution document constitutes an affirmation under the penalties of perjury	OF STATE

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)

that the facts stated herein are true.)

Stephen Christopher Todd

Typed or printed name of signee