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EXAMINER



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G. MCLEOD

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EXAMPLE 1

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Tydus	Name of Limited Liability Company
The enclosed Articles of Organization	and fee(s) are submitted for filing.
Please return all correspondence conc	erning this matter to the following:
Uriel	L Davey Jr. Name of Person
Exclus	INE Construction, LLC Firm/Company
1475 N.	W 1815† Address
Miami, FL.	3 3/6 9 City/State and Zip Code
Cole 08 :	ess: (to be used for future annual report notification)
For further information concerning thi	s matter, please call:
Urieh Dave Name of Person	at (305) 307 - 6954 Area Code & Daytime Telephone Number
Enclosed is a check for the following	ng amount:
\$125.00 Filing Fee \$130.00 File Certificate	ling Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, c of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Ad Registration Division of P.O. Box 63 Tallahassee	Section Registration Section Corporations Division of Corporations 327 Clifton Building

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability (Construction, LLC
(Must end with the words	s "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street addr	ress of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1475 N.W 18/st. Miani, Fl. 33/69	1475 N.W 181 St. Miami, FL 33196
URIEL !	Daved TR
	Name No. W. 18/5#. Drida street address (P.O. Box NOT acceptable).
	Miny FL 33/69 City, State, and Zip
liability company at the place des	gent and to accept service of process for the above stated limited signated in this certificate, I hereby accept the appointment as this capacity. I further agree to comply with the provisions of al

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..

Signature (REQUIRED)

(CONTINUED)

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	URIEL DOVEY TR. 1495 N.W 1815+ Miami, FL. 33/69
<u> </u>	
(Use attachment if necessary)	
TICLE V: Effective date, if other than the an effective date is listed, the date must be or 90 days after the date of filing.) . REQUIRED SIGNATURE:	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior
Signature of a member	regan authorized representative of a member.
(In accordance with section 608, constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	.408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
· _ Uriek_	ped 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)