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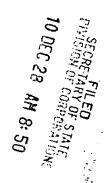
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# **COVER LETTER**

EFFECTIVE DATE 1 201

TO:

Registration Section
Division of Corporations

# SUBJECT: R GREEN CARPENTRY SERVICES LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LASHELLE KEEL		
	Name of Person	
	Firm/Company	
<b>58 SIOUX CIRCLE</b>		
	Address	
HAVANA, FL 32333		
	ty/State and Zip Code	
	.,	
E-mail address: (to be used	for future annual reo	ort notification)
·	•	<b>,</b>
For further information concerning this matter, pleas	se call:	
LASHELLE KEEL	950	E20 E171
Name of Person	_at (850	539-5171
Name of Person	Area Code	& Daytime Telephone Number
Englosed is a check for the following amount:		
Enclosed is a check for the following amount:	_	
\$125.00 Filing Fee \$\sum \$\sum \text{\$\sum \sen \text{\$\sum \text{\$\sum \text{\$\sum \text{\$\sum \text{\$\sum \exitting \sen \text{\$\sin \text{\$\sum \text{\$\sum \text{\$\sum \sen \text{\$\sum \text{\$\sum \text{\$\sum \text{\$\sum \text{\$\sum \sen \text{\$\sum \exittin \sen \text{\$\sum \text{\$\sum \text{\$\s	\$155.00 Filir Certified Co (additional cop	py Certificate of Status &

# **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 Circle
Tallahassee, FL 32301

EFFECTIVE DATE 1/1/2011

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# R GREEN CARPENTRY SERVICES LLC

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

## **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:
837 BROOKWOOD DR	837 BROOKWOOD DR
TALLAHASSEE, FL 32308	TALLAHASSEE, FL 32308

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

LASHELL	KEEL
	Name
58 SIO	UX CIRCLE
	Florida street address (P.O. Box NOT acceptable)
HAVANA	<sub>FL</sub> 32333
	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:

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	RICHARD GREEN	
	837 BROOKWOOD DR	
	TALLAHASSEE, FL 32308	
MGRM	MARGARET GREEN	
	837 BROOKWOOD DR	
	TALLAHASSEE, FL 32308	
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(Use attachment if necessary)	T	

ARTICLE V: Effective date, if other than the date of filing: <u>JANUARY 1, 2011</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

# **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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

# LASHELLE KEEL

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)