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T. CLINE

JAN 25 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Perfection Landscape Maintenance, LLC Name of Limited Llability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Zebulon T Starlin
Name of Person
Firm/Company
2496 Southwood Plantation RD AptA
Tallahassee Florida 32311 City/State and Zip Code
Chyrodic and Esp code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Zeb Starling at (850) 251-3018 = Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee & □ Certificate of Status □ Certified Copy □ Certificate of Status & Certified Copy □
Mailing AddressStreet/Courier AddressRegistration SectionRegistration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Perfection Landscape Maintenance 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:
2496-A & Southwood Plantation RD
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:
Name Name Name Name Name Name Name Name Northwood Plantation RD Florida street address (P.O. Box NOT acceptable)
Tall Fla. 3231 FL
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 provident of unstatutes 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.
The state of the s
Registered Agent's Signature (REQUIRED)
(CONTINUED)
Page 1 of 2

	address of each Manage	ging Member(s): er or Managing Member is as follows:
Title: "MGR" = Mana "MGRM" = Mana MGRM" = Mana	ager anaging Member	Name and Address: Zeb Starling 2496-A Southwood Plantation RD
(If an effective date is li to or 90 days after the o	e date, if other than the disted, the date must be late of filing.)	date of filing: (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED S	ICNATURE:	
REQUIRED 5.		<u></u>