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T. HAMPTON

JAN 2 8 2011

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Deep South Construction Services LLC Name of Limited Liability Company	
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:	
Bruce Copes Name of Person	
Deep South Construction Services LLC	
Firm/Company	
110 Jasmine Circle	
Address	
Safety Harbor, FL. 34695 City/State and Zip Code Bruce copes @ Gol. Com E-mail address: (to be used for future annual report notification)	
City/State and Zip Code	
Bruce copes @ aol. com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Bruce 1000s 11727, 512,4967	
Name of Person at (737) 513.4967 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee & S130.00 Filing Fee & Certificate of Status Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	&
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	



RECEIVED

11 JAN 25 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2010

BRUCE COPES 110 JASMINE CIR SAFETY HARBOR, FL 34695

SUBJECT: DEEP SOUTH CONSTRUCTION SERVICES LLC

Ref. Number: W10000052483

We have received your document for DEEP SOUTH CONSTRUCTION SERVICES LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P04000102626 (DEEP SOUTH CONSTRUCTION SERVICES INC).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 210A00026389

Jan 06, 2011

Florida Dept of State Divisions of Corporations

Document number P04000102626 Deep South Construction Services Inc

I have no intention of reinstating the name of Deep South Construction Services, Inc.

Robin Copes

Bruce Copes

11 JAN 25 PH 3:31

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

P ...

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Deep South Construction Services LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
Deep South Construction Services LCC	
(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 Compa	any is:
Principal Office Address: Mailing Address:	
110 Jasmine Circle Safety Harbor, FL 34695 34695	
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:	
Bruce Copes	
Mame Name	
110 Jasmine Circle	
Florida street address (P.O. Box NOT acceptable)	
Safety Harby FL 3445 City, State, and Zip	
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provision statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.	t as is of all h and
Registered Agent's Signature (REQUIRED)	SECR
Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2)

5 15 1

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR		R - () - 25
MAIC	MARA MARA	110 Jacmine CV
		Bruce Copes 110 Jasmine Cr Salay Harpor Fr 3465
	_	
•	_	

ARTICLE V: Effective date, if other than the date of filing: ______. (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.)

Bruce Copes
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)

11 IAN 25 PH 3:38