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To:

Division of Corporations
Fax Number : (850) 617-6383

From: **Carrie L. Ramos, Paralegal, please fax confirmation to (407) 244-5690**

Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : I20010000078
Phone : (407) 843-8880
Fax Number : (407) 244-5690

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Girard Landscape Construction, LLC

Certificate of Status	0
Certified Copy	0
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ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GIRARD LANDSCAPE CONSTRUCTION, LLC

ARTICLE II - Address:

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

Mailing AddressP.O. BOX 1119
SANFORD, FL 32772-1119Principal Office Address701 CODISCO WAY
SANFORD, FL 32771**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

RICHARD A. GIRARD
701 CODISCO WAY
SANFORD, FL 32771

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

The Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company. The name and address of each Manager is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGR	RICHARD A. GIRARD P.O. BOX 1119 SANFORD FL 32772-1119
MGR	WILLIAM R. GIRARD P.O. BOX 1119 SANFORD FL 32772-1119


 AUTHORIZED REPRESENTATIVE'S SIGNATURE

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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.

RICHARD A. GIRARD

Typed or printed name of signer

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)

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