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	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
2 PICK-UF	WAIT MAIL	
	(Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

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EFFECTIVE DATE 03/11/11



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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: RIBEITO'S LANGSCAPE Lighting LLG 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:
Joshua James Riberro Name of Person
Riberrus Landscape Lighting
1894 Ocean Pond Drive
Breutive Dyahoo Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at QUU 447 448 TO Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certificate of Status & Certified Copy (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 Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Riberro's Landscape Lighting LU (Must end with the words "Limited Liability Company, "L.N.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:
1894 Ocean Pond Dr 5ame Jacksonville Beach Fl32750
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:
Joshua Ribeiro
Name 1894 Ocean Pond Wile Florida street address (P.O. Box NOT acceptable) 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 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 Registered Agent's Signature (REQUIRED)
(CONTINUED)

Page 1 of 2

EFFECTIVE DATE 03/11/11

The name and address of each Manag	ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Jahua Ribeiro
	
	
(Use attachment if necessary) TCLE V: Effective date, if other than the	date of filing: (OPTIONAL)
	e specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	MA THE SALE AND TH
Signature of a membe	er or an authorized representative of a member.
constitutes an affirmation under I am aware that any false inform	1.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true nation submitted in a document to the Department of States are provided for in s.817.155, F.S.)
Joshua L	omes Ribeiro pel or printed name of signee
Filing Fees:	

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

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)