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II AMASSE ELOE EGRETTE STATA

B. BOSTICK
MAR 2 5 2011
EXAMINER

COVER LETTER

TO:	Registratio Division of	n Section Corporations		
SUBJ	јест: <u>"</u>	te Choice Name of Limite	LAWN SEXVICE d Liability Company	s LLC.
The e	nclosed Article	s of Organization and fee(s) are s	submitted for filing.	
Please	return all corr	espondence concerning this matte	er to the following:	
	-	Justin K	YLE Fuller Name of Person	
	Rite (Firm/Company	
	71710	<u> </u>	Firm/Company	TALS:
	3	05 Stewart	DRive Address	TAR T
				CO The Target
	_ 50	ebring FL.	33876 /State and Zip Code Embasem4i C. or future annual reportation)	सिंदी का विकास स्वामी की की
		City	/State and Zip Code	2: 2 0RI
		E-mail address: (to be used for	embazgm4iC. or future annual repo Botification)	Compm N
For fu		on concerning this matter, please		
J	ustin Nam	K. Fuller me of Person	at (863) 655- Area Code & Daytime Telep	6 (11 hone Number
Enclo	sed is a check	for the following amount:		
\$125.0	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
,		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 Ci Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rite Choice LAWN !	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
305 Stewart Dr. Sebring FC. 33874	305 Stewart Dr. Sebring Fr. 33876
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re Tustin Kyle Name	Fuller HAR 24
	ress (P.O. Box NOT acceptable)
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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

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

"MGR" = Manager "MGRM" = Managing Member MGR	Telia Kida Frallas
m G/C	Justin Kyle Fuller 305 Stewart pr. Sebring P2. 33876
	ASSE
	PH 2:
	RIDA RIDA
(Use attachment if necessary)	
LE V: Effective date, if other than the	ne date of filing: (OPTIONA be specific and cannot be more than five business day
days after the date of filing.)	be specific and cannot be more than five business day
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.)

Justin Kyle Fuller
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)