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Office Use Only



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Effective Date 6 1 1

JIVISION OF CORPORATION

T. HAMPTON
MAY 24 2011

**EXAMINER** 

## **COVER LETTER**

Division of Corpora			
SUBJECT:D	Name of Limited Liab	g L.L.C.	
,	Name of Limited Liab	flity Company	
The enclosed Articles of Orga	unization and fee(s) are submit	ted for filing.	
Please return all corresponder	ace concerning this matter to the	e following:	
	Jason J	ones	
	Name	of Person	
	Dynamic La	andscaping L.L.C.	
	ritm/C	Company	
	17722 Rive	ndel Rd	
	Ad	dress	
	Lutz, FL	33549 and Zip Code	
	City/State	and Zip Code	
E-	mail address (to be used for futur	e annual report notification)	
For further information conce		•	
Jason Jo Name of Pers	ones at (_	813 ) 751-6 Area Code & Daytime Telep	1569 hone Number
Enclosed is a check for the	<del>-</del>		_
\$125.00 Filing Fee \$13 C		55.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Address	Street/Courier Address	
Di	gistration Section vision of Corporations	Registration Section Division of Corporations	
	D. Box 6327 Ilahassee, FL 32314	Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ircle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Cor	mpany is:
Dynamic Landscaping (Must end with the words Li	mited 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:
17722 Riverdel Rd	17722 Riverde   Rd.
Lutz, FC 33549	
	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another
The name and the Florida street address	ss of the registered agent are:
Jason	Name Name
	Avendel Rd. a street address (P.O. Box <u>NOT</u> acceptable)
Lutz	FL 33549 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 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 Agont's Signature (REQUIRED)

(CONTINUED)

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DIVISION OF CORPORATIONS

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

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

MGR	T T
71101	Jason Jones 17722 Rivendal Rd.
	Lutz, FL 33549
<del></del>	
(Use attachment if necess	ary)
TI E V. Effective data (Car	shouthough a data of Cilina (A) 12 - 11 (OPTIONA
ffective date is listed, the	ther than the date of filing: $6/1/2011$ . (OPTIONA date must be specific and cannot be more than five business day
days after the date of fili	

(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.)

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)

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