L11000007/245

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2011 JUN 15 AM 9: 04
SECRETARY OF STATES
STALL AHASSEF, FLORIDA

J. SAULSBERRY EXAMINER JUN 20 2011

COVER LETTER

TO: Registration of	on Section Corporations						
_{SUBJECT:} Rog	jer Handy Service,	LLC					
	Name of Limit	ted Liability Co	mpany	•			
The enclosed Article	es of Organization and fee(s) are	submitted for fi	iling.				
Please return all corr	respondence concerning this mat	ter to the follow	ring:				
MARIO	N ROGER WILLIS						
		Name of Person	ı				
Roger I	Handy Service, LL0	<u> </u>					
		Firm/Company					
3357 N	W 20 TH PLACE						
		Address	E				
JENNING	GS, Florida 32053				ZS	2011	
		ty/State and Zip C	ode		A SE	=	h- -w
mrw787@	windstream.net				HAS KETA	NUL	FT 78
-	E-mail address: (to be used	for future annual	report notification)		SEE	5	ŗ
For further informati	on concerning this matter, pleas	e call:			OF S	A	
MARION ROO		at (386	9383592		FLORID	ئ ا0 :6	ور:
Na	me of Person	Area C	code & Daytime Tele	ephone Number			
Enclosed is a check	for the following amount:						
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified	iling Fee & [Copy copy is enclosed)	\$160.00 Fili Certificate o Certified Co (additional cop	f Status py	&	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisi Clifto 2661	Courier Address tration Section on of Corporation in Building Executive Center (lassee, FL 32301	s			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A DELCT D. V. N.		
ARTICLE I - Name: The name of the Limited Liability Con	mpany is:	
Roger Handy Service, L	LC	
(Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")	_
ARTICLE II - Address:		
The mailing address and street address	s of the principal office of the Limited Liability	Company is:
Principal Office Address:	Mailing Address:	
3357 NW 20 TH PLACE	3357 NW 20 TH PLACE	
JENNINGS, Florida 32053	JENNINGS, Florida 32053	- -
	Registered Office, & Registered Agent's Signa s own Registered Agent. You must designate an individual or a	
The name and the Florida street address	ss of the registered agent are:	l
MARION ROGER WILLIS		SECO
	Name A	
3357 NW 2	Name O TH PLACE Ita street address (P.O. Box NOT acceptable)	2011 JUN 15 AM 9
Florid	la street address (P.O. Box NOT acceptable)	
Jennings	FL 32053	/

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

LE V: Effective date, if other than the date of filing: 07 -0/201)	GR" = Manager GRM" = Managing Member		
(Use attachment if necessary) LE V: Effective date, if other than the date of filing: 07 -0/20/)	GRM	MARION ROGER WILLIS	
(Use attachment if necessary) LE V: Effective date, if other than the date of filing: 07 -0/-20/)			
LE V: Effective date, if other than the date of filing: 07 -0/20/)	•	JENNINGS, Florida 32053	
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fective date is listed, the date must be specific and cannot be more than five		· · · · · · · · · · · · · · · · · · ·	

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.)

MARION ROGER WILLIS

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)