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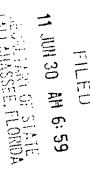
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K. SALY EXAMINER JUL 1 2011

# **COVER LETTER**

Division of Corporations
SUBJECT: Buzzelli Maintenance LLC.  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:
Keith A. Buzzelli Name of Person
Buzzelli Maintenance LLC.
6654 Lawrence Woods Ct
Lantana F-L 33462 City/State and Zip Code
KABUZZ62@AOL.COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KeHAA. Buzzelli at (561) 306-0255  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$130.00 Filing Fee & \text{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 Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Buzzelli Maintenance LLC
(Must end with the words "Limited 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:
6654 Lamerence Works	+ 6654 Lawrence Woods Ct
Lan ( C . ) 182	- Lanjana / C 3/10/

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:

Name

6654 Lawrence Woods Ct

Florida street address (P.O. Box NOT acceptable)

Lantana FL 33462

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 Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRIV - Managing Member	Keith A. Buzzelli 6654 Lawrence Woods Ct
NA	
NA	
NA	
Use attachment if necessary)	
LE V: Effective date, if other thatefective date is listed, the date in	n the date of filing: (OPTION ust be specific and cannot be more than five business d
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