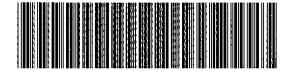
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EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Tony's Irrigation And Repai	r, LLC
	imited Liability Company
The enclosed Articles of Organization and fee(s)	are submitted for filing.
Please return all correspondence concerning this	matter to the following:
William M Shelton	Name of Person
	Name of Person
Bill G. Agall, CPA	Firm/Company
	гиш/сопрану
2101 N 9th Ave	
	Address
Pensacola, Fl 32503	Per 1
	City/State and Zip Code
skip@allstaffpayrollservices.con	nsed for future annual report notification)
	<u> </u>
For further information concerning this matter, p	lease call: 8: CAA 2
William M Shelton	at (850) 439-1059
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amoun	t·
<u></u>	_
\$125.00 Filing Fee Status Certificate of Status	
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address
P.O. Box 6327	Clifton Building
Registration Section Division of Corporation	Registration Section ons Division of Corporations Clifton Building

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Comp	any is:	
Tony's Irrigation and Repair, LLC	ted Liability Company, "L.L.C.," or "LLC.")	
(Masi ena Williame Words Emilia	ied Blacinty Company, Biblos, or BBC.	
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
2009 West Garden, St	2009 West Garden St	
Pensacola, Fl 32502	Pensacola, Fl 32502	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.) The name and the Florida street address of Bill G. Agall	wn Registered Agent. You must designate an indiv	vidual or another
2101 N 9th ave		The same of the sa
Florida s	treet address (P.O. Box NOT acceptable)	B: 21 FLORIDI
Pensacola	_{FL} 32503	DA -
	City, State, and Zip	
77 . 1	to the first the first term of	

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)

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	Anthony Fisher 2009 West Garden St Pensacola, Fl 32503	
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		THE AT
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		<i>P</i>
(Use attachment if necessary)		
CLE V: Effective date, if other than the	date of filing:	(OPTIONAL)
effective date is listed, the date must b 00 days after the date of filing.)		
REQUIRED SIGNATURE:		
	<i>l</i> -/'/	

(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.)

Anthony Fissher

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)