

L11000082931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

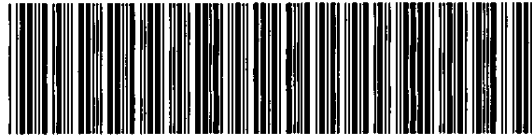
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900210105919

07/20/11--01001--006 **125.00

RECEIVED
11 JUL 19 PM 2:43
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

T. CLINE
JUL 19 2011
EXAMINER

FILED
11 JUL 19 PM 2:53
DEPT. OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MUD WORK 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:

DESSIE FRANKLIN

Name of Person

Firm/Company

2131 BERKSHIRE DR

Address

TALLAHASSEE, FL 32304

City/State and Zip Code

eFranklin08@EMBARQMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELIZABETH FRANKLIN

Name of Person

at (850)

575.9129
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 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 Circle
Tallahassee, FL 32301

FILED
11 JUL 19 PM 2:53
TALLAHASSEE, FL 32301
SECRETARY OF STATE

I, DESSIE FRANKLIN AGREE NEVER TO
REINSTATE AND WORKS L.L.C

DOC # L05000043386 AND RELEASE THE NAME

[Handwritten Signature]

FILED

11 JUL 19 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

DESSIE FRANKLIN
2131 BERKSHIRE DR
TALLAHASSEE, FL 32304

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 7-19-11 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Dessie Franklin

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.)

DESSIE FRANKLIN

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)

FILED
11 JUL 19 PM 2:53
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE