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Special Instructions to I	Filing Officer:	
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TALLAHASSEE, FLORID

D. BRUCE

SEP 0 2 2011

**EXAMINER** 

## COVER LETTER

TO:

R egistration Section
Division of Corporations

SUBJECT:

ARMOUR CONSTRUCTION

SERVICES, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please referral COT governor on

TEODORO A. ARIAS III

Name of Person

ARMOUR CONSTRUCTION SERVICES, LLC

Firm/Company

567 LAGOON OAKS DRIVE

Address

PANAMA CITY BEACH, FLORIDA 32408

City/State and Zi p Code

ariaspcb@yahoo.com

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

For further information concerning this matter, please call:

TEODORO A. ARIAS III

at (850) 541-2789

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

Name of Person

\$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

St rect/Courier A ddress

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

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SECTION OF STATE

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

# ARMOUR CONSTRUCTION SERVICES, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

### ARTICLE II - A ddress:

The mailing address and street address of the principal office of the Limited Liability Company is:

# Principal Office A ddress:

ARMOUR CONSTRUCTION SERVICES, ILC 567 LAGOON OAKS DRIVE

PANAMA CITYBEACH, FL ORIDA 32408

## Mailing A ddress:

ARMOUR CONSTRUCTION SERVICES, LLC 567 LAGOON OAKS DRIVE PANAMA CITY BEACH, FLORIDA 32408

ARTICLE III - R egistered A gent, R egistered Office, & R egistered A gent'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:

Teodoro A. Arias III

Name

567 Lagoon Oaks Dr.

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

Panama City Beach, FL 32408

City, State, and Zi p

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)

Page 1 of 2

Title:	Name and A ddress:
"MGR" = Manager	Name and A doress;
"MGRM" = Managing Membe	टा
<u>MGRM</u>	TEODORO A. ARIAS III
	567LAGOON OAKS DRIVE
	PANAMA CITY BEACH, FLORIDA 32408
<u>MGR</u>	NANCY O FRESHOUR
	65 HAM PTON CIRCLE
	NICEVILLE, FL 3 2578
MGR	VICTOR M. MANN
<del></del>	129 TRANQUILITY LANE
	DESTIN_FLORIDA 32541
(Use attachment if necessary)	
RTICLE V: Effective Date, if other (	than the date filing: August 30, 2011. (OPTIONAL)
f an effective date is listed, the date	than the date filing: August 30, 2011. (OPTIONAL) must be specific and cannot be more than five business days prior
f an effective date is listed, the date or 90 days after the date of filing.)	
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