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(Reque	estor's Name)	
(Addre	ess)	
. (Addre	ss)	
(City/S	tate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nar	me)
(Docur	nent Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	
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Office Use Only



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J. BRYAN

SEP - 9 2011

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Blade Runner Lan	dscaping LLC.	
	Name of Limited L	iability Company	
	of Organization and fee(s) are subm	_	M SEP
Flease return an corres	pondence concerning this matter to	the following.	10 to
		Rodriguez	TO B
	Nan	ne of Person	Q.F.
,		andscaping LLC	
	Fin	m/Company	
	1552	22 sw 8In	
		Address	
		FL 33194	
	City/Sta	te and Zip Code	,
		ez1@gmail.com	
	E-mail address: (to be used for fu	iture annual report notification)	
For further information	concerning this matter, please cal	l:	
	Rodriguez at		
Name	of Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check f	or the following amount:		
\$125.00 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:
Blade Runner Landscaping 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:	<u>Mailing Address:</u>		
15522 sw 8 in	15522 sw 8 In		
Miami,FL	Miami,FL Miami,FL	-	
33194	33194	<u>-</u> <u>-</u>	
(The Limited Liability Company cannot business entity with an active Florida	eet address of the registered agent are:		
	Phillip Rodriguez	ွ တာ	i
	Name	司芸	111
	15522 sw 8 ln	AM ID: 30	0
	Florida street address (P.O. Box NOT acceptable)	36	ı
	Miami,Fl _{FL} 33194	•	
•	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)

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	Name and Address:
MGRM	Marvin Cano
MORW	143 sw 113 ave # 103
	Miami,FL 33174
MGRM	Phillip Rodriguez
	15522 sw 8 ln
	Miami,FL 33194
	in Total
	27
(Use attachment if necessary)	TE STORY
`	Om '
CLE V: Effective date, if other than the	date of filing: (OPTIONA
CLE V: Effective date, if other than the	Om '
CLE V: Effective date, if other than the effective date is listed, the date must be 0 days after the date of filing.) REQUIRED SIGNATURE:	date of filing: (OPTIONA
CLE V: Effective date, if other than the effective date is listed, the date must be 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a may after an affirmation under I am aware that any false inform	date of filing: (OPTIONA e specific and cannot be more than five business days
CLE V: Effective date, if other than the effective date is listed, the date must be 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member	date of filing:

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)