6411000115033

(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:
A. LUNT
OCT -7 2011
EXAMINER

Office Use Only



700212936787

10/06/11--01005--011 **125.00

COVER LETTER

Division of Corporation	ons			
SUBJECT: L&R Prop	erty Preser	vation, LLC		
, <u></u>		ed Liability Company		
The enclosed Articles of Organiz	zation and fee(s) are	submitted for filing.	•	
Please return all correspondence	concerning this mat	ter to the following:		
Robert Manga	aroo	·		
		Name of Person		
L & R Property	/ Preservati	on, LLC		
		Firm/Company		
766 Daffodil Di	r			
		Address	TAL	2011
Wellington, FL 3			L C ARE	2011.0C.1 -6
robertmangaroo@		y/State and Zip Code	TARY ASSE	4
		for future annual report notification)		2
For further information concerni	ng this matter, pleas	e call:	LORIC	52
Robert F. Mangaroo		at (561) 531-2998	A	
Name of Person		Area Code & Daytime Telepi	hone Number	
Enclosed is a check for the fol	llowing amount:			
\$125.00 Filing Fee \$130.0 Certi	00 Filing Fee & ificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fe Certificate of Statu Certified Copy (additional copy is end	ıs &
Regist Divisi P.O. E	ng Address tration Section ion of Corporations Box 6327 nassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci	rcle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ICL	ÆΙ	- Name	e:
-----	-----	----	--------	----

The name of the Limited Liability Company is:

L & R Property Preservation, 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>		
766 Daffodil Dr Wellington, FL 33414	766 Daffodil Dr Wellington, FL 33414		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.)		ividual or another	
The name and the Florida street address of the	e registered agent are:	CAET	1
Lennox B. Mangaroo	Jr	TARY O	
Nan	ne	ino wa	m
6187 United St		PH LES 52)F:STATE : FLORIDA	
Florida street a	address (P.O. Box NOT acceptable)	RRA €	
West Palm Beach, F	L _{FL} 33411	\$ N	
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)

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	CRETARY CAHASSEE
MGRM	Lennox B. Mangaroo Jr.	FF ST
	6187 United St	
	West Palm Beach, FL 33411	<u> </u>
MGRM	Robert F. Mangaroo	
	766 Daffodil Dr	
	Wellington, FI 33414	
(Use attachment if necessary)		
	data of filings	(OPTIONIAL)
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	e specific and cannot be more than five	

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.)

Robert F. Mangaroo

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)