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> J. SAULSBERRY EXAMINER OCT 14 2011

# **COVER LETTER**

Name of Limited Liability Company

TO:

Registration Section
Division of Corporations

The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
HARVEY ELLIS TR
Name of Person \$\overline{\Sigma}_{\Sigma}\$
ELLIS CUSTOMI CARPENTRY LLC ES 8
Firm/Company SSR CA
139 N. FOURTH ST.
Address Control of the control of th
SANTAROSA BCH FL 32459 \$ 8
Elliscustom ar Dentry @ amail, com.
E-mail address: (to be used for future annual teport notification)
For further information concerning this matter, please call:
HARVEY ELLIS JR at (850) 830-1980  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$  Certificate of Status \$\text{Certified Copy (additional copy is enclosed)}}  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	I -	Nam	e:
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The name of the Limited Liability Company is:

ELLIS CUSTOM CARPENTRY 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:

Frincipal Office Address:	Maning Address:	
139 N. FOURTH ST. SANTAROSA BEACH FL 32459	139 N. FOURTH ST. SANTAROSA BEACH FL 32459	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)  The name and the Florida street address of the	istered Agent. You must designate an individual or another	-
HARVEY ELLIS Name  139 N. FOURTH	SECO. SECO.	
SANTAROSA BEACH	idress (P.O. Box NOT acceptable)	is.
Having been named as negistaned execut and to	account complex of muccoun for the above stated limited	

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

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member	
(Use attachment if necessary)	
LE V: Effective date, if other than the ffective date is listed, the date must l	e date of filing: (OPTIONA be specific and cannot be more than five business day
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