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TALLAHASSEE, FIGRINA

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SECRETARY OF STATE
AND AHASSEE FLORIE

J. BRYAN

JAN - 6 2012

EXAMINER

COVER LETTER

TO: Registration Division of C			•
SUBJECT: <u>Fro</u>	Name of Limited Li		Services
The enclosed Articles	of Organization and fee(s) are subn	nitted for filing.	
Please return all corres	spondence concerning this matter to	the following:	
Fran	K Dray		
		ne of Person	
trank	Dray Mount	·······	rnces
	Firr	n/Company	ALC NO
448	Tall Stand	Ct	2
		Address	SS 6 1
Talla	hassee, FL	200310	ma = t
dray9	City/Sta City/Sta City/Sta De-mail address: (to be used for fu	te and Zip Code O M ture annual report notification)	19
For further information	n concerning this matter, please call	l:	
Frank D	e of Person at	750 443-1 Area Code & Daytime Tele	6072 phone 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)	National 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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Frank Dray Maintenance Services 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:	Mailing Address:
448 Tall Stand Ct Tallahassee, Pl 32312	same
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
business entity with an active Florida registration.) The name and the Florida street address of the re	gistered agent are:
FRANK LRA Name	THE SECOND PORTS
Florida street addr	ess (P.O. Box NOT acceptable)
City, Stat	FL 323/2- e, 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)

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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Frank Dray 448 Tall Stand Ct Tallahassee, R 32312
	The state of the s
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	

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.)

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)