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(Re	equestor's Name)			
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PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
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# **COVER LETTER**

, Т(		Section Corporations			
su	вјест:	ary Johnson Name of Limit	ed Liability Company	000	
Th	e enclosed Articles	of Organization and fee(s) are	submitted for filing.		
Ple		spondence concerning this matt	<del>-</del>	(	
	Suza	anne E Joh	Name of Person	······································	<del></del>
	Garu	Tohnson	E Son Firm/Company		· · · · · · · · · · · · · · · · · · ·
	202	8 N Devco	_		2012 PALLE
		PARC FI City City E-mail address: (to be used i		5	MAR-5 BA
	Suz	anne.TOL	`ve. c.o~		
		E-mail address: (to be used f	or future annual report noti	fication)	25 ÷
Fo	further informatio	n concerning this matter, please	call:		<b>3</b> 3
<u></u>	S U Zanna Nam	e E Johnson e of Person	at ( <b>%</b> 63 ) 4	53-075 8 ytime Telephone Number	- 
En	closed is a check	for the following amount:			
\$12	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee Certified Copy (additional copy is end	Certificat	e of Status &
,		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Registration Sec Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	ction rporations g c Center Circle	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Gary Johnson & Son L.L.C.," or "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:
27 July Place Key Largo Fl 33037	Rey Largo FI En 22 Rey Largo FI En 22 3303 P. T.
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the register to t	Office, & Registered Agent's Signature red Agent. You must designate an individual or another gistered agent are:
2028 N Devco	ess (P.O. Box NOT acceptable)  FL 33725 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)

# 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	
MGRM	Charles G Johnson Jr 27 July Place Key Largo F1 33037
MGRM	Suzanne & Johnson & 2021 N Devco Red To The Avon Park F1 33825 TI
	FE CONTRACTOR OF THE CONTRACTO
(Use attachment if necessary)	
	ate of filing: (OPTIONAL)
o or 90 days after the date of filing.)	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.)

Suzanne E Johnson
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)