L12000036638

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
C DICKLID C MAIL
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
12-11776
A. LUNT
A. LOIVI
MAR 1 5 2011
EXAMINER

Office Use Only



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SECRETARY OF STABLE TALLARASSEE, FLORISH

2012 MAR 14 AM 解罗



February 29, 2012

AMANDA PLNATHABER 6031 S 2ND STREET TAMPA, FL 33611

SUBJECT: PLANTHABER GROUND MAINTENANCE L.L.C.

Ref. Number: W12000011776

We have received your document for PLANTHABER GROUND MAINTENANCE L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 512A00008222

COVER LETTER

Registration Section

· , TO:

Division of	Corporations			
SUBJECT: Plan	thaber Ground Mai	ntenance L.L.C		
SUBJECT:		d Liability Company		
The enclosed Articles	s of Organization and fee(s) are s	ubmitted for filing.		
Please return all corre	espondence concerning this matte	r to the following:		
Amand:	a Planthaber			
7 ariariae		Name of Person		
		Firm/Company		
0004.0	Omel Other at			2012 M.JR 14
60315	2nd Street	Address	TA 71	-
		Address	SSE	= 1
Tampa, F	L 33611			
	•	State and Zip Code	108 108	悪
amandace	ollins1@verizon.net	or future annual report notification)	The state	<u>49</u>
For further information	on concerning this matter, please	call:		
Amanda Planti	haber	at (813) 545-0925		
Nar	ne of Person	Area Code & Daytime Telephone Nun	nber	
England is a shoot	for the following amount:			
	_			
J\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		0 Filing Fe cate of Statu	•
		(additional copy is enclosed) Certific	ed Copy nal copy is end	:losed)
	Mailing Address	Street/Courier Address		
	Registration Section Division of Corporations	Registration Section Division of Corporations		
	P.O. Box 6327	Clifton Building		
• •	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	TI	CI	Æ	I	_	N	am	e:
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The name of the Limited Liability Company is:

Planthaber Ground Maintenance L.L.C.

(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:	
6031 S 2nd Street	6031 S 2nd Street	
Tampa, FL 33611	Tampa, FL 33611	
	ldress of the registered agent are:	ividual or another
	Name	
6031 5 2	nd Street	
003132	na Olicci	
	Florida street address (P.O. Box NOT acceptable)	

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 Mem	ber	
MGR	Patrick Planthaber	
	6031 S 2nd Street	
	Tampa, FL 33611	
		22
		2 H.A.
		75 -
		42 -
		tog &
		<u> </u>
(Use attachment if necessary	')	
CLE V: Effective date, if othe	r than the date of filing:	(OPTIONAL
effective date is listed, the dat O days after the date of filing	e must be specific and cannot be more than fi .)	ve business days
REQUIRED SIGNATURE		
	Malle 3-5-12	2
1753		

(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.)

Patrick Planthaber

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)