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DIVISION OF CORPURATIONS

APR - 6 2012 T. HAMPTON

## **COVER LETTER**

TO:	Registration Division of 6	Section <sup>,</sup> Corporations	
SURJ	RCT. Kirk's	s Lawn & Landsca	ping, LLC
30.04		Name of Limit	ed Liability Company
The or	nclosed Articles	of Organization and fee(s) are	submitted for filing.
Please	return all corre	spondence concerning this mat	ter to the following:
	John K.	Kirk III, CPA	Name of Person
	Thomso	n, Brock, Luger &	,
			Firm/Company
	3375-G	Capital Circle NE	
	-γ		Address
	Tallahass	ee, FL 32308	
		Ci	ty/State and Zip Code
	JKIRK@T	BL-CPA.COM	
Ė., 6.			for future annual report notification)
FOI IU	mier miornisus	on concerning this matter, pleas	e can.
Johr	n Kirk		at (850 ) 385-7444
	Nan	ne of Person	Area Code & Daytime Telephone Number
Enclo	sed is a check	for the following amount:	
<b>[/]\$</b> 125.0	O Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional 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 Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited	L

liability Company is:

business entity with an active Florida registration.)

# Kirk's Lawn & Landscaping, 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:

The name and the Florida street address of the registered agent are:

John K. Kirk III, CPA

3375-G Capital Circle NE

Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32308 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..

(CONTINUED)

Page I 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 "MGRM" = Managing Memb	Name and Address:
MGR	John K. Kirk, Jr. 2357-3 S. Tamiami Trail PMB 127
	Venice, FL 34293
MGR	Colleen C. Kirk
	2357-3 S. Tamiami Trail PMB 127
	Venice, FL 34293
(Use attachment if necessary)	
ARTICLE'V: Effective date, if other ( (If an effective date is listed, the date to or 90 days after the date of filing.)	than the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a	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.)

Colleen C. Kirk

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 5.00 Certificate of Status (Optional)

SECRETARY OF STATE DIVISION OF CORPURATIONS

12 APR -5 AM IO: 25