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FLORIDA LIMITED LIABILITY CO.  
All Gone Tree Service, LLC

|                       |          |
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J. BRYAN

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EXAMIN

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**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

ALL GONE TREE SERVICE, LLC

**ARTICLE II ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

11659 OLD DADE CITY ROAD  
KATHLEEN, FLORIDA 33849

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

DAVID BAREFOOT  
11659 OLD DADE CITY ROAD  
KATHLEEN, FLORIDA 33849

Having been named as registered agent 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.

x David Barefoot

DAVID BAREFOOT / Registered Agent's signature

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PAGE 2 ALL GONE TREE SERVICE, LLC

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS**

MANAGING MEMBER

JOSEPH DANIELS

11659 OLD DADE CITY ROAD

KATHLEEN, FLORIDA 33849

MANAGING MEMBER

DAVID BAREFOOT

11659 OLD DADE CITY ROAD

KATHLEEN, FLORIDA 33849

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x David Barefoot

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.

DAVID BAREFOOT

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