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(Re	questor's Name)		
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(Cit	y/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Name	e)	
(Do	cument Number)		
Certified Copies	_ Certificates o	of Status	
Special Instructions to Filing Officer:			
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SECRETARY OF STATE

D. BRUCE
MAY 3 0 2012

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Ellis Construction and Restoration LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jeff Fllis Jr Name of Person
Ellis Construction and Restoration UC
1970 Frontera St.
Navarre, FL 37566 City/State and Zip Code
ellis restoration@yahoo.com
For further information concerning this matter, please call:
Schyler Pierce at (850) 730-9383 50 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Enclosed is a check for the following amount:
S125.00 Filing Fee \$\bigs\tag{\text{\$130.00 Filing Fee & Certificate of Status}}\$\$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations

Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Ellis Construction (Must end with the words "Limited Liability	and Restoration LLC by Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1970 Frontera St. Navarre, FL 32500	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	Tipe mod Tipe Tipe Tipe Tipe Tipe Tipe Tipe Tipe
Jeff Ellis Name	Jr. SSEE F
1970 Frontera Florida street addr	St. ess (P.O. Box NOT acceptable)
Navarre, FL	FL 3250 (4 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..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:			
"MGR" = Manager "MGRM" = Managing Member				
MGR	Jeff Ellis Jr 1970 Frontera St. Navarre, Fl 32506			
			121	
		NETARY OF	MAY 29 BH	
(Use attachment if necessary)		F STATE FLORIDA	H 2: 45	D
ARTICLE V: Effective date, if other than the	date of filing:	. (OPTIONA	L)	
(If an effective date is listed, the date must be to or 90 days after the date of filing.)	e specific and cannot be more than five	business day	's prie	or

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.)

Jeff Clis Tr.
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)