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G. MCLEOD

JUN 11 2012

**EXAMINER** 



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12 JUN-8 PH 4:40
SCORETARY OF STATE
FALLAHASSEE, FLORID.

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Two Burds Holdings, 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:	
William P. Burdette	<del></del>
Name of Person	
Suncoast Contractors Supply, Inc.	
Firm/Company	
3160 Kutak Rd	
Address	
Ft. Myers, FL 33916	
City/State and Zip Code	_
bill@suncoastsupply.net	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
William P. Burdette at (239 ) 337-1123	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\scrip{\scrip{1}}\$	&
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Comp	pany is:	
Two Burds Holdings, LLC	<b>.</b>	
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	of the principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
3160 Kutak Rd	3160 Kutak Rd.	
Ft. Myers, FL 33916	Ft. Myers, FL. 33916	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)		individual or another
The name and the Florida street address	of the registered agent are:	12 JUN - 1 SECRETAT ALLAHAS
William P. Burde	ette	JUN-8
	Name	v ≥ ∞

3160 Kutak Rd,

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

, <sub>FI</sub> 33916

Fort Myers, FL

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..

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:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	r
MGRM	William P. Burdette
	15291 Sam Snead Lane
	N. Ft. Myers, FL 33917
MGRM	George W. Burdette, Jr.
	211 Bouchillion Dr.
	Greenville, SC 29615
	Greenville, SC 29615
(Use attachment if necessary)	
Territor 5000 1 1 10 10 1	the same bean OF 2012
	an the date of filing: June 05, 2012 (OPTIONAL)
effective date is listed, the date m	
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effective date is listed, the date m I days after the date of filing.)	
effective date is listed, the date m I days after the date of filing.)	
ffective date is listed, the date me days after the date of filing.)  REQUIRED SIGNATURE:	
ffective date is listed, the date me days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a me (In accordance with section)	nust be specific and cannot be more than five business days pr

William P. Burdette

constitutes a third degree felony as provided for in s.817.155, F.S.)

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)