

L12000103988

8/13/12

Division of Corporations

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000203139 3)))



H120002031393ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : FURCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: markwatson1786@yahoo.com

RECEIVED

12 AUG 13 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
Watson Construction Services LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 13 AM 7:10

H12000203139

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Watson Construction Services LLC**

ARTICLE II - Address

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

Principal Office Address:12901 Scottish Pine LaneClermont, FL 34711**Mailing Address:**12901 Scottish Pine LaneClermont, FL 34711**ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature**

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

Mark Watson

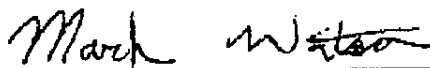
Name

12901 Scottish Pine Lane(P.O. Box or Mail Drop Box **NOT** Acceptable)Clermont, FL 34711

(City / State / Zip)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 13 AM 7:10

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 - Mark Watson

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

H12000203139

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Mark Watson - 12901 Scottish Pine Lane, Clermont, FL 34711

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Mark Watson

Typed or printed name of signee

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 13 AM 7:10