# L12000119693

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PALLAHASSEE FINALE,

B. BOSTICK

SEP 1 9 2012

**EXAMINER** 

### **COVER LETTER**

Registration Section

Division of Corporations

TO:

SUBJECT: USD Lawn Lare and Tree Service 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:			
Derek white Name of Person			
J+D Lawn Care and Thee Ser	دررد	L	
3913 Roberts Point Rd			
Sarasota Florida 34242 City/State and Zip Code	·		
Derekwhite 88 @ Gmail. Com	ALC:	72	
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	AHASSE	SEP 18	
Derek white at (941) 404-9909  Name of Person at (941) 404-9909  Area Code & Daytime Telephone Number	E. HLOR	PM 12: 57	
Enclosed is a check for the following amount:	10 P	57	
\$ \$125.00 Filing Fee \$\bigs\tag{\$130.00 Filing Fee & Certificate of Status}\$155.00 Filing Fee & Certificate of Certified Copy			

#### **Mailing Address**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street/Courier Address

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

141 Care and	Tree Service c	<u>-60</u>
(Must end with the words "Limited Liability	(Company, "L.L.C.," or "LLC.")	
ARTICLE-II - Address: The mailing address and street address of the prin	ncipal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
3913 Roberts Point Rd.	(SAME) 3913	3 Roberts Point
34349		34 <u>2</u> 42
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's red Agent. You must designate an individ	Signature: ual or another
The name and the Florida street address of the re	gistered agent are:	12 SI
Derek wr Name	118	EP 18
3913 Robert	ess (P.O. Box NOT acceptable)	E PH
i fortua street addit	33 (1.0. Box <u>1.0.1</u> deceptable)	

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..

City, State, and Zip

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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** or ok lie Signature of a member or an authorized representative of a member.

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)

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

(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 fingle I am aware that any false information submitted in a document to the Department of state;