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2012 SEP 24 PH 3: 02 SECRETARY OF STATE ALLAHASSEE, FLORIES

TIME

J. SAULSBERRY EXAMINER SEP **24** 2012

## **COVER LETTER**

Division of Corporations		
SUBJECT: THOMAS RUSSELL CONSTRUCTION SER	LVICES, LL	L
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
THOMAS H. RUSSEll Name of Person		
SEC TALL		
Firm/Company		
350Z N. MONROG ST.	E	
	ורוי	i
TAILAHASSEE FL. 32303 STATE OF THE STATE OF	O	ļ
City/State and Zip Code		
E-mail address: (to be used for future annual report notification)	_	
		į
For further information concerning this matter, please call:		
THOMAS RWSSELL at (856) 559-342 LARGE Code & Daytime Telephone Number	•	
Enclosed is a check for the following amount:		į
		ł
\$125.00 Filing Fee \$\ \text{S155.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\ \text{Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed)		
Mailing Address Street/Courier Address		
Registration Section Registration Section Division of Corporations Division of Corporations		ļ
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		
Tallahassee, FL 32314  Tallahassee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

THOMAS	Russell	CONSTRUCTIO	N SERVICES, UK
(Mus	st end with the words "Limited Liabili		
ARTICLE II - Add The mailing address		ncipal office of the Limited Lia	bility Company is:
Principal Office A	ddress:	Mailing Address:	
3502 N	32303	SAME	
TAIL FL.	32303		<del></del>
(The Limited Liability Con		Office, & Registered Agent's cred Agent. You must designate an individ	
The name and the F	lorida street address of the re	egistered agent are:	2012 Sec Tall
	THOMAS R	455611	F IL 2012 SEP 24 SECRETARY ALLAHASSE
	Name		m <sub>O</sub> :
		MONROE ST. ress (P.O. Box NOT acceptable)	FL SE
	TAILAHASSEE	FL 32303	) 1: 02
	City, Sta	te, 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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

THOMAS ZUSSE

350 Z N MONROE ST

TAIL F( 32303)

(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:** 

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.)

THOMAS RUSSE!

Typed or printed name of signed

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)