12000126139

(Reques	stor's Name)			
(Address	s)			
(Address	s)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL			
(Busines	ss Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
	Wait			





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10/03/12-01016--004 **125.00

SECRETARY OF STATE

RECEIVED FILE

J. SAULSBERRY
EXAMINER
OCT
3 2012

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Wast end with the words "Limited Liability	nstruction LLC ry Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the printing.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Crowsbrowille, Fl.	Same.
Creekordville	ered Agent. You must designate an individual or mother
liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)

The name and address of each Man	nager or Managing Member is as follows:	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address: Warren Aiken Toward Land De Toward ord Uille Fl. 3	_
	ALLAH	2012 OC
	SEE, FL	7-3 AM
(Use attachment if necessary)	DRIDA DRIDA	11:30
TCLE V: Effective date, if other than the effective date is listed, the date must 90 days after the date of filing.)	he date of filing: (OPT be specific and cannot be more than five busine	TONAL) ess days pi
REQUIRED SIGNATURE: /		
Signature of a mem	nun Ober La. aber or an authorized representative of a member.	
constitutes an affirmation un I am aware that any false info	608.408(3), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are to formation submitted in a document to the Department of States only as provided for in s.817.155, F.S.)	rue.

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

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)

Typed or printed name of signee

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	Warren A. Name of Limited	Ven's Constru I Liability Company	ction LLC	
The enclosed Articles o	f Organization and fee(s) are su	ibmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
Werr	en L. Airen	Name of Person		
Warre		Construction Firm/Company	LLC	
157 U	Dodland I	Address	74/2 174/2	
Craw	fordville F	L 32327 State and Zip Code	OCT -3	
cleme	rs/ 168@ Ual	r future annual report notification)	AMII: 30	
For further information	concerning this matter, please	call:	30 STE	
Warren Ai	VET of Person	at (850) 745-8 Area Code & Daytime Telep	300	
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		