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Effective Date 10-20-12

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2012 OCT 23 AH 8427
SECRETARY OF STATE

J. SAULSBERRY EXAMINER

OCT 24 2012

COVER LETTER

Division of Corporations		
SUBJECT: Construction Luc 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:		
Michael F. Little		
Name of Person		
Litted construction LLC		
Firm/Company		
9004 Alexandra Circle		
Address		
1. 2. 2. 4. 4. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	~	
City/State and Zip Code City/State and Zip Code City/State and Zip Code	2812 OCT 23	
41 Ha 05 @ a mail. com	3	Tita-
E-mail address: (to be used for future annual report notification)	23	1
For further information concerning this matter, please call:	<u> </u>	
m, chack Little at (561) 337-9179	တ္	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: TO T	27	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)		
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name:

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The name of the Limited Liability Company is:

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

Principal Office Ac	ldress:	Mailing Address:			
9004 Ale	-xandra Circle	good Alexandra Cire	<u>:-</u> b-e-		
(The Limited Liability Corbusiness entity with an ac		Office, & Registered Agent's Signa ered Agent. You must designate an individual or a egistered agent are:	nother	2012 OCT 23	áre.
	Michael F	. Little	ARTAI ARTAI	OCT 2	***
	Name		, ,	ω	Ĭ
_	1004 Alexan	dra Circle	0F SI		ſ
•	Florida street add	ress (P.O. Box NOT acceptable)	0 T	ඨා	ŧ.
	Wellington	FL 33414	TATE	27	

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" = Mar "MGRM" = M	nager Ianaging Member			
mer				
	•	Jennifer Little 9004 Alexandraciale		
15		wellington, FL 33414		
(22		- A- (-)		
		good Alexandra Elele		
		WEILING STANK		
Mas	M	michael Little		
h**		9004 Alexandra Circle		
4		Wallington, FL 33414		
				
(Use attachme	nt if necessary)			
•	• •	late of filing: 10-20 - 12 (OPTIONAL)		
		specific and cannot be more than five business days pr	nor	
to or 90 days after the	date of filing.)	TAL STATE	7	
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REQUIRED 9	SIGNATURE:	30 m	7912 OCT	'n
<u>RECURED</u> .	JONA! ORD.	ري سين المجري	23	ļ
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		The state of the s		
	Signature of a member	or an authorized representative of a member.	æ	\$ <i>3</i>
con: I an	stitutes an affirmation under t n aware that any false informa	408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)	27	
	m. cho	sel F. Little		

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