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SECRETARY OF STATE
SECRETARY OF STATE
ALLAMASSEE, FLORIDA

APPROVED AND FILED

D. BRUCE

NOV 0 6 2012

EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: A+ Tree Trimming & Haul, LLC

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:

Eric C.	Chaney						
		Name of Person		<u> </u>	·-·		
		Firm/Company		·			
4920 S	antee Street						
		Address			ï,Ç.		12
Orlando	o, FI 32804				*	CRETA	12 NOV -
	Cit	ty/State and Zip Co	de		•	75.EX	Ċ
imaginatio	onfactory@msn.co	om				<u> </u>	7
	E-mail address: (to be used	for future annual re	port notification)		•		
For further information	concerning this matter, please	e call:			ज ज	**************************************	25
Eric Charle	es Chaney	_at (407	₃ 435-5	525		4	
Name	of Person		de & Daytime Tel	ephone Number		_	
Enclosed is a check f	or the following amount:						
■\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fil Certified C (additional co	-	2 \$160.00 F Certificate Certified (additional of	e of St Copy	atus &	
	Mailing Address Pagintention Section		Courier Addres	<u>s</u>			

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

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

APPROVE AND FILFI



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RTI	CI	E	T _	Na	me

The name of the Limited Liability Company is:

A+ Tree Trimming & Haul LLC	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	

ARTICLE II - Address:

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

Principal Office A	Address:	Mailing Address:	
4920 Santee Street		4920 Santee Street	
Orlando, Fl 32804		Orlando, Fl 32804	
(The Limited Liability Cobusiness entity with an	ompany cannot serve as active Florida registration	ress of the registered agent are:	
		Name	E 00 1
	4920 Santee Street		- , S\$ '.
	Flor	rida street address (P.O. Box NOT acceptable)	
	Orlando	_{FL} 32804	* <u>*</u> *
		City, State, 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)

Page 1 of 2

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 MGRM Eric Charles Chaney 4920 Santee Street Orlando, Fl 32804

(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.)

Eric Charles Chaney

Typed or printed name of signee

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)