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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	rusy Bee	Waste	Removal	<u>L</u> 1
•	Name o	of Limited Liability Co	ompany	
Dear Sir or Madam:				
The enclosed Article	es of Correction and fee(s) a	re submitted for filing		
Please return all corr	espondence concerning this	s matter to the following	ng:	
Willie	am Herna Name of Person	ndez		
				
	Firm/Company			
13951	ydia Av		_	IALI
				Ä
Delte	OMA Clo 2 City/State and Zip Code	32742	_	ALLAHASSEE
	daatt.ne			- COMBA
For further informati	on concerning this matter,	please call:		
William	m Hernand	<u>e 2</u> at (<u>386</u> Area Co	1 428 - 233 ode & Daytime Telephone Number	<u>}</u>
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	ions er Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check	for the following amount:	:		
\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy	

2013 FEB 18 PX 12: 45

. ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	T: The name of the limited liability company is: Busy Bee Waste Removal LLC		
SECO	ND: The articles of organization or the application to transact business		
(CI	HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA	TEMENT	
AT.	Contains an incorrect statement. The incorrect statement, the reason the state incorrect, and the corrected statement are as follows: Incorrect - William Hernandez Y	ment is	
	Correct - William Hernandez me	irm	
		·	
	<u>OR</u>		
	Was defectively signed. The manner in which the document was defectively the appropriate correction are as follows:	signed and	
		013 F	T
Dated:		EB 18 P	
	Signature of a member or authorized representative of a member	PM 12: 46 OF STATE E FLORIDA	
	Brenda Hernandez Typed or printed name of signee		
	Filing Fee: \$25.00		

Certified Copy:

\$30.00 (optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limit	ted Liability Company is:			
Busy T	Bee Wast	e Removal	LLC	
J. J	in with the words bitting blush	ny company, biblion, c. bbo.,		
ARTICLE II - Addro The mailing address a		incipal office of the Limited L	iability Company is	s;
Principal Office Add	ress:	Mailing Address:		
William H Brenda Her		1395 Lydia Dr.	. Deltona l	Fl. 39725 . 39725
ARTICLE III - Reging The Limited Liability Companies entity with an active	any cannot serve as its own Regist	Office, & Registered Agent'	's Signature:	٠,
The name and the Flor	rida street address of the r	-	13 F	
	Brenda He	unancez_	FEB LAHA	<u>n</u>
		_	S 4	
ļ	1395 Lydia	i lor.		<u> </u>
*******	Florida street add	iress (P.O. Box <u>NOT</u> acceptable)	21.5	J
	Deltona	_{FL} 32725	PM 12: 57	
	City, Sta	ate, and Zip)A	

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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member MGRM" = Managing Member	William Hernandez
	Delfora (P. 32725
MGRM	Brenda Hernandez 1395 Lydig Br Deltong Fl. 32725
	13 FEB
	R PHIZ:
(Use attachment if necessary)	, I with the
ARTICLE V: Effective date, if other than (If an effective date is listed, the date m prior to or 90 days after the date of filing	oust be specific and cannot be more than five business days

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.)

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)