# 13000034165

(Re	questor's Name)			
(Ad	dress)			
	dress)	. <b></b>		
(Au	uiess)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Openitional Openitors	O			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
		:		

Office Use Only



400245151204

03/05/13--01006--013 \*\*125.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CHIMAR MAR = 6 2013

#### RICHARD A. PERRY

= Attorney at Law ==

## 820 East Fort King Street • Ocala, Florida 34471 352-732-2299

March 1, 2013

Registration Section Division of Corporations P.O. Box 6237 Tallahassee, Florida 32314

Re: Lawn Barberz, LLC

To Whom It May Concern:

With regard to the above-captioned LLC, please find enclosed the following:

- 1. Cover letter to Registration Section, Division of Corporations.
- 2. Articles of Organization for Lawn Barberz, LLC.
- 3. Check No. 126, payable to Division of Corporations, in the amount of \$125.00, representing the filing fee for the LLC.

Thank you.

rm

**Enclosures** 

cc: Clients

Sincerely,

Roberta Miro, Paralegal to

Richard A. Perry

#### **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	<u> </u>	orz uc	
	Name of Limite	ed Liability Company	
The enclosed Articles of	Organization and fee(s) are s	submitted for filing.	
Please return all correspo	ondence concerning this matte	er to the following:	
	ABNER RO	6U6S	
		Name of Person	
	·	Firm/Company	
	8645 NW9	# prenne	
		Address	
<del></del>	OCHLA, FL	oliot 34475-76 y/State and Zip Code	<i>Y</i> }
	LAW WBARDER	LZ@ YMbil.Com	
	E-mail address: (to be used f	or future annual report notification)	
For further information c	oncerning this matter, please	call:	
HONGE	ROBUBS	at (382) 160-33	<del></del>
Name o	of Person	Area Code & Daytime Telep	none Number
Enclosed is a check for	r 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	

FILED

2019 MAR -5 AM 11: 47

#### ARTICLES OF ORGANIZATION FOR LAWN BARBERZ, LLC

SECRETARY OF STATE TALLAMASSEE, FLORIDA

The undersigned, for the purpose of forming a limited liability company under Chapter 608, Florida Statutes, hereby adopts the following Articles of Organization (hereinafter referred to as the "Articles").

#### **ARTICLE I - NAME**

The name of the Limited Liability Company is Lawn Barberz, LLC.

#### **ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is 8645 NW 9<sup>th</sup> Avenue - Ocala, Florida 34475-7622

#### ARTICLE III - MANAGEMENT

The Limited Liability Company is to be managed by a manager or managers.

#### ARTICLE IV - LIMITATION ON AGENCY AUTHORITY OF MEMBERS

No member of the Limited Liability Company shall be an agent of the Limited Liability Company solely by virtue of being a member pursuant to Fla. Stat. §608.4235.

#### ARTICLE V- INITIAL MEMBERS AND MANAGERS

The name and address of the initial members and managers of the Limited Liability Company are:

Abner Robles 8645 NW 9<sup>th</sup> Avenue Ocala, Florida 34475-7622

Yamil E. Ortiz 12551 NE 60<sup>th</sup> Street Williston, Florida 32696-4781

#### ARTICLE VI - INITIAL REGISTERED AGENT

The name, mailing address, and street address of the initial registered agent of the Limited Liability Company is:

Darmary Robles 8645 NW 9<sup>th</sup> Avenue Ocala, Florida 34475-7622

#### STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Fla. Stat. Chapter 608.

L Robles

Darmary Robles

Registered Agent

### REQUIRED SIGNATURE OF AT LEAST ONE MEMBER OR AUTHORIZED REPRESENTATIVE OF A MEMBER

The undersigned certify they are members of the Limited Liability Company and authorized to execute and file these Articles.

In accordance with Fla. Stat. §608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. We are aware that any false information submitted in a document to the Florida Department of State constitutes a third degree felony as provided for in Fla. Stat. §817.155.

Abner Robles

Manager and Member

Dated: March 1, 2013

3y: 1

Manager and Member

Dated: March 1, 2013