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SECRETARY OF STATE ALL AHASSEE, FLORIDA

C. LEWIS

JUN 2 4 2013

EXAMINER

(850) 245-6051.

## **COVER LETTER**

	Legistration Sec Division of Corp		44.	Apr .
	Ŧ	M IRRIGA	TION LLC	
SUBJECT	Г:	<u> </u>	ed Liability Company	
The enclos	sed Articles of (	Organization and fee(s) are s	ubmitted for filing.	
Please retu	ırı all correspoi	ndence concerning this matte	er to the following:	
		PARKS MES	جادلاب	
		,	Name of Person	
		PM IRA	HOW LLC	
			Firm/Company	
		18921 STX	TE ROKD 44	
			Address	
		EUSMS, FL	32736	
		•	•	
		NKLTER MESS	or future annual report notification)	Coh
		E-mail address: (to be used to	or future annual report notification)	
For further	r information co	ncerning this matter, please	call:	
PA	RKS M	=551CK	at ( <u>352</u> ) <u>383-c</u> Area Code & Daytime Telep	0019
	Name of	Person	Area Code & Daytime Telep	hone Number
Enclosed	is a check for	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	ircle

Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compan	ıy is:
PM JERIGAT	jou 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	he principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
18921 ST. RO. 44 EUSTIS, FL. 32736	18921 ST. RD. 44 EUSTIS, FL. 32736
	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of	the registered agent are:
PARKS ME	SSICK AND SEE SEE
ì	
18921 50,	
	eet address (P.O. Box NOT acceptable)
EUSTIS,	FL 3 2736 RD 32
Cı	ty, 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:

<u>Title:</u>	Name and Address:		网上上巴			
"MGR" = Manager "MGRM" = Managing Member	<del> </del>		JUN 2			
MERM	PARKS MESSICK 18921 ST. RO. 44 EUSTIS, FC 327	PAL	CRETARI LAHASSI —	OF S E <b>e. Fl</b>	TATE Orida	
MGR	JANICE MESSICH 18921 ST RD 44 EUSTIS, FL 327	)	 			
77 1 C						

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JUNE 18, 2013. (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.)

Pires Messicle

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)