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J. Shivers JUN 1 7 2014

## **COVER LETTER**

Division of Corporations
SUBJECT: Manight's Services 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:
Name of Person
Knight's Servicos Firm/Company
9218 Bart Lett Lang Address
Tallahasse 7L32305 City/State and Zip Code
Knightservices a quail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Pelson at (SSO) Nob-6378  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

TO:

**Registration Section** 

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 Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	The name of the Limited Liability Company is:
Hirk	Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
•	(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

ARTICLE 1 - Name:

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

Principal Office Address:	Mailing Address:
2712 Lake Mory St Tail Wasse, 74 32301	9218 Bortlett Lane Talkahassee gr. 22305
<b>3</b>	J

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Mirk Might
Name

9218 Bartlett Lane
Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32305

City 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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2





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