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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT:Delaney Construction Services, LLC
50202	Name of Limited Liability Company
	closed Articles of Organization and fee(s) are submitted for filing.
	Robert Delaney, Jr. Name of Person
	Delaney Construction Services, LLC Firm/Company
	301 Adalia Terrace Address
	Port Charlotte, FL 33953 City/State and Zip Code
ing	rid.delaney3@gmail.com E-mail address: (to be used for future annual report notification)
For furt	her information concerning this matter, please call:
Robert	Delaney, Jr at (941) 585-9777 Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
\$ 125.00	Filing Fee U\$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Siloo.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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Delaney Construction Services, LLC. (Must end with the words "Limited I	Liability Company, "L.L.C.," or "	'LLC.")
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the Limited Liability Com	pany is:
Principal Office Address:	Mailing Address:	
301 Adalia Terrace Port Charlotte, FL 33953	301 Adalia Terrace Port Charlotte, FL 33953	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration	Registered Agent. You must desig	
The name and the Florida street address of the registered a	agent are:	
Robert Delaney, Jr. Name		
301 Adalia Terrace Florida street address (P.O. Box	NOT acceptable)	
Port Charlotte	FL 33953	
City	Zip	
Having been named as registered agent and to accept servithe place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the obligation.	the appointment as registered age f all statutes relating to the proper	ent and agree to act in this r and complete performance
Registered Agent's Signatu	ure (REQUIRED)	14.00
(CONTINUE	ED)	TIZ4 MASS
Page 1 of 2		

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Robert Delaney, Jr.
	301 Adalia Terrace
	Port Charlotte, FL 33953
AMBR	Ingrid Delaney
	301 Adalia Terrace
	Port Charlotte, FL 33953
	
E V: Effective date, if other than the date of	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or
(Use attachment if necessary) EV: Effective date, if other than the date of ective date is listed, the date must be specifilling.) EVI: Other provisions, if any.	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or
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E V: Effective date, if other than the date of ective date is listed, the date must be specifiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605	aber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document
E V: Effective date, if other than the date of ective date is listed, the date must be specifiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mem (In accordance with section 605 constitutes an affirmation under	nber or an authorized representative of a member. .0203 (1) (b), Florida Statutes, the execution of this document the penalties of periury that the facts stated herein are true:
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