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COVER LETTER

Bobby Brox at (850) 982-3047 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount:	TO: Registration Section Division of Corporations
Please return all correspondence concerning this matter to the following: Bobby W Brock TIT Name of Person Brock's Lawn Care, LLC Firm/Company 3006 Hill Lrest Ave, Address Pensaco (a Fr 3+526 City/State and Zip Code City/State and Zip Code Brock Slawn or City/State and Zip Code Brock Slawn or Bobby Brock Slawn or E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bobby Brock at (850) 982-304 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee Certificate of Status Certificate of Status & Certificate Copy (additional copy is enclosed) Certificate of Status & Certificate Copy (additional copy is enclosed)	SUBJECT: Brock's Lawn Care, LCC Name of Limited Liability Company
Brock's Lawn Care, LLC Firm/Company 3006 Hill Lrest Ave, Address Lensacola Ft. 32526 City/State and Zip Code Brocks Lincus Danil com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bobby Brock at (850) 982-3047 Name of Person The following amount: Enclosed is a check for the following amount: S125.00 Filing Fee Certificate of Status Certificate of Status & Certificate Opy (additional copy is enclosed) Certificate Of Status & Certificate Copy (additional copy is enclosed)	The enclosed Articles of Organization and fee(s) are submitted for filing.
Brock's Lawn Care, LCC Firm/Company 3006 Hill Lrest Ave, Address Pensaco (a Ft 37526 City/State and Zip Code Brock's Lawn on Manage of Person E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bobby Brock at (850) 982-3047 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is enclosed) Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)	Please return all correspondence concerning this matter to the following:
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Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Address Addre	Brock's Lawn Care; LLC
For further information concerning this matter, please call: Bobby Brow at 850 P82-3047 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \$\frac{1}{2}\$\$\$ \$\frac{1}{2}\$\$\$ \$\frac{1}{2}\$\$\$ \$\frac{1}{2}\$\$\$ \$\frac{1}{2}\$\$\$\$ \$\frac{1}{2}\$\$\$\$ \$\frac{1}{2}\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$	
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Bobby Brox at (850) 982-3047 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \$\text{Certificate of Status}\$ \$\text{Certified Copy}\$ \$\text{Certified Copy}\$ \$\text{Certified Copy}\$ \$\text{Certified Copy}\$ \$\text{Certified Copy}\$ \$\text{Certified Copy}\$	City/State and Zip Code Brocks Advince & Brail com E-mail address: (to be used for future annual report notification) Brock Brock Brock Annual Brock Brock
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Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy	Enclosed is a check for the following amount:
	Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy

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:		
Brock's Lawn Care, 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 principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
Pensacola Fe 32526 Same		
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 another business entity with an active Florida registration.)	al or	
The name and the Florida street address of the registered agent are: BOBY WBROUC THE Name 3006 HillCrest Ave Florida street address (P.O. Box NOT acceptable) City Zip		
Having been named as registered agent and to accept service of process for the above stated limited liability the place designated in this certificate, I hereby accept the appointment as registered agent and agree to a capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete pe of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided the complete per of the proper and I am familiar with and accept the obligations of my position as registered agent as provided the complete per of the proper and I am familiar with and accept the obligations of my position as registered agent as provided the proper and I am familiar with and accept the obligations of my position as registered agent as provided the proper and I am familiar with and accept the obligations of my position as registered agent as provided the proper and I am familiar with and accept the obligations of my position as registered agent agent and I am familiar with and accept the obligations of my position as registered agent as provided the proper and I am familiar with an accept the obligations of my position as registered agent as provided the proper and I am familiar with a provided the proper and I am familiar with a provided the proper and I am familiar with a provided the proper and I am familiar with a provided the proper agent as a provided the proper agent and I am familiar with a provided the proper agent and I am familiar with a provided the proper agent and I am familiar with a provided the provided the proper agent and I am familiar with a provided the provi	ict in thi irformai	is nce
Registered Agent's Signature (REQUIRED) Registered Agent's Signature (REQUIRED)	14 DEC -8	THE SER
(CONTINUED)	AM 9:	-
Page 1 of 2 OF THE PAGE 1 OF T	5	

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR - Manager MGR	Bobby W BrodeTI
	3006 Hillrest Aug. Pansalpla Fr 37526
	
(Lice attachment if necessary)	
(Use attachment if necessary) EV: Effective date, if other than the date cective date is listed, the date must be sof filing.)	te of filing:
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Page 2 of 2