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(Req	uestor's Name)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

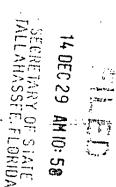
Office Use Only



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12/29/14--01018--019 **125.00

J. Shivers JAN 0 9 2015



COVER LETTER

TO:	Registration Section Division of Corporations	· . ·	
SUBJ	IECT: Steve Dyer Trucking LLC	Limited Liability Company	· · · · · · · · · · · · · · · · · · ·
		Limited Liability Company	
The e	nclosed Articles of Organization and fee(s	e) are submitted for filing.	
Please	e return all correspondence concerning this	s matter to the following:	
	Steve Dyer		
		Name of Person	•
	Steve Dyer Trucking LLC		
		Firm/Company	
	75474 Johnson Lake Road		
		Address	
	Yulee, Fl. 32097		
		City/State and Zip Code	
<u>s</u>	dyer92@gmail.com E-mail address: (to be u	used for future annual report notifica	ation)
For fu	rther information concerning this matter, p	•	,
Steve	P Dyerat Name of Person	\ <u></u>	lephone Number
	rame of Ferson	Alea Code Daytille Te	repriorie ivanibei
Enclos	sed is a check for the following amount:		
\$125.0	00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	S160.00 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 Addi Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:		
Steve Dyer Trucking LLC			
(Must end w	vith the words "Limited Liability	Company, "L.L.C.," or "L	LC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal office of the	ne Limited Liability Compa	ny is:
Principal Office Address:	<u>Maili</u>	ng Address:	
75474 Johnson Lake Road		4 Johnson Lake Road	
Yulee, Fl. 32097	Yule	e, Fl. 32097	
The name and the Florida street a	ddress of the registered agent are	: :	
Steve Dy			
	Name		
	ohnson Lake Road	aontahla)	
	street address (P.O. Box NOT ac	•	
Yulee	City FL	32097 Zip	
	City	2.10	
capacity. I further agree to com of my duties, and I am familiar	d agent and to accept service of p. rtificate, I hereby accept the appoint the provisions of all state with and accept the obligations Chapter 605, F	pintment as registered agent utes relating to the proper a of my position as registered S.S.	and agree to act in this nd complete performance
	(CONTINUED) Page 1 of 2		14 DEC 25 TALLAHASS
			1881 1881

"MGR" = Manager Steve Dyer 75474 Johnson Lake Road Yulee, Fl. 32097 (Use attachment if necessary) LE V: Effective date, if other than the date of filing: January 1, 2015 (OPTIONAL) fective date is listed, the date must be specific and cannot be more than five business days prior to of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document out the Department of State 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.) Steve Dyer Typed or printed name of signee Filing Fees:	<u>Title:</u>	Name and Address:
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