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PICK-UP V	VAIT MAIL
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Certified Copies Ce	ertificates of Status
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SECRETARY 13 AM 7:55

The name of my company is "Bridge to Bridge Mowing and Hauling, LLC". I have bad hand writing.

Leon Jones

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Bridge To Bridge Mowing And Hauling, 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:
Leon Jones Name of Person
Name of Person
Bridge To Bridge Mowing And Pholing, LLE
114 Gardenia St
Address
City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (330) 990 - 0879 Name of Person Area Code Daytime Telephone Number
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 of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Bridge To Bridge Mowing ANd Holing, LLC (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: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address: Mailing Address:
Powers City Beach Fl 32407
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:
X + ON ONES
Name 114 Gardenia Street
Florida atreet address (B.O. Boy NOT acceptable)
Pinema With Beach FL 30407 City Zip
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 608-F.S Registered Agent's Eignature (REQUIRED)
Page 1 of 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	LEON TONES, MGR
MGR	1111 6 1 56
AMBR	114 Gardenia St. Francis St. 32407
AMBR	Wendy Tones
	Promo City Beach F1 32407
	Process CIty Blub F1 32407
	
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(Use attachment if necessary)	
(Use attachment if necessary)	
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ARTICLE IV-