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Special Instructions to	Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

15 OCT -5 PM 12: 19

SEGNE MAY OF STATE TALL, HAY WE FELL FOR

September 9, 2015

1/4

RONALD YOUNG 1210 SW 52ND TERR CAPE CORAL, FL 33914

SUBJECT: J & R RENTALS LLC Ref. Number: W15000059450

We have received your document for J & R RENTALS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is H08329 (J & R RENTAL INCORPORATED).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call - (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 815A00019005

COVER LETTER

	egistration Section vision of Corporations
SUBJECT:	Sunstate Mowing Services LLC
SUBJECT	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	Ronald Young
	Name of Person
	Firm/Company
	828 SW 17th Ter
	Address
	Cape Coral, FL 33991
	City/State and Zip Code
F	Ron33914@yahoo.com
	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
	Ronald Young 239 222-1443
_	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
]\$ 125.00 Fil	ing Fee \$\int_{\text{Certificate of Status}}\text{\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}

Mailing Address

New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing 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 Liabi	lity Company is:			
Sunstate Mowing 5		d Liability Comp	any, "L.L.C.," or "LLC.")	
(iviusi cii	d with the words. Limite	а шаоппу сопра	any, E.E.C., of ELC.	
ARTICLE II - Address: The mailing address and street	address of the principal of	office of the Limi	ted Liability Company is:	
Princ	ipal Office Address:		Mailing Address:	
828 SW 17th Ter		8	28 SW 17th Ter	
Cape Coral, FL 33	991	<u> </u>	ape Coral, FL 33991	
ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	ny cannot serve as its owr	Registered Ager	gent's Signature: nt. You must designate an individual o	r
The name and the Florida stree	et address of the registere	d agent are:		
	Rolaco LLC			
	•	Name		
	1210 SW 52nd Ter			
	Florida street addres	ss (P.O. Box <u>NO</u>	[acceptable]	
	Cape Coral	FL	33914	
	City	State	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)

Page 1 of 2

15 OCT -5 AM 10: 37

SECRETARY OF STATE OF CORPORATIONS

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR - Manager	Ronald Young
WOK	828 SW 17th Ter
	Cape Coral, FL 33991
AMBR	Terry Davis
INIDIC	828 SW 17th Ter
	Cape Coral, Fl 33991
AMBR	Tish Davis
	828 SW 17th Ter
	Cape Coral, FL 33991
(Use attachment if necessary)	
CLEV: Effective date if other than the	date of filing: (OPTIONAL)
	be specific and cannot be more than five business days prior to or 90 days after
ate of filing.)	e specific and cannot be more than five business days prior to or 70 days after
	not meet the applicable statutory filing requirements, this date will not be listed
ocument's effective date on the Departn	
ocument 3 effective date of the Departit	ione of blate 3 records.

REQUIRED SIGNATURE

Signature of a member of an authorized corresentative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any filse information submitted in a document to the Department of State constitutes a third degree from as provided for in s.817.155, F.S.

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)