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(Red	uestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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EFFECTIVE DATE

ZUID JAN - / PH 3: 36
SECRETARY OF STATE
BALLAHASSEE FROMINA

JAN 2 0 2016 T BROWN

COVER LETTER

Division of Corporations
SUBJECT: A 3 G FL SERVICES L.L.C.
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:
Kenneth Mills
Name of Person
Firm/Company
1720 Lady Fern TV1 Address
Deland, FL 32720 City/State and Zip Còde
Kennymill \$1985 () 6 moli): com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
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{(additional copy is enclosed)} \\ \text{Certified Copy} \\ \t
check cashed. (additional copy is enclosed) Selecting new name.
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 21, 2015

KENNETH W. MILLS 1720 LADY FERN TRAIL DELAND, FL 32720

SUBJECT: A & G SERVICES L.L.C Ref. Number: W15000081567

We have received your document for A & G SERVICES L.L.C and your check(s) totaling \$130.00. 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 L15000190560 - AG SERVICES, LLC.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return 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.

Teresa Brown Regulatory Specialist II

Letter Number: 215A00026650

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FLORIDA LIVITED LIABILITY COMPANY	20 11 .
ARTICLE I - Name:	Jan &
The name of the Limited Liability Company is:	12 Sign 74 >>
	Carry Ph
A & G FL Service, L.L.C.	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	No. Park Control
A DOTION DIV. A 11	0.00
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	`~, *
The making address and succe address of the principal office of the Limited Liability Company is.	EFEECTIVE DATE
Principal Office Address: Mailing Address:	1-1-16
1720 Lady Ferntro	
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:	
2/11/0	

4

Name

1720 Lady Fevn TV 1

Florida street address (P.O. Box NOT acceptable)

Deland, FL 3272-0

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)

(CONTINUED)

Page 1 of 2

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Kenneth Mills
	Delandiff 3270
	Delandi Fí 3270
_	

(Use attachment if necessary) LE V: Effective date, if other than the date of fi	ling: 1/1/1 (OPTIONAL)
LE V: Effective date, if other than the date of fifective date is listed, the date must be specific of filing.) If the date inserted in this block does not meet iment's effective date on the Department of St	iling: (OPTIONAL) c and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will not tate's records.
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