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## | COVER LETTER

TO:

**Registration Section** 

Division of Corporations
SUBJECT: <u>ELLIS Tree Service LLC</u> 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:
Danny EULIS Name of Person
ELLIS Tree Service
380 Dove Ln Monticello Fl 32344
Monticello Fl 32344  City/State and Zip Code  Treecuter 100 @ Yahan. com  E-mail address: (to be use! for future annual report notification)
For further information concerning this matter, please call:
Danny Ellis at 850 363-8272  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$\sigma \frac{125.00 \text{ Filing Fee}}{\text{Certificate of Status}} \frac{130.00 \text{ Filing Fee} & Certificate of Status}{\text{Certified Copy} & Certificate of Status & Certified Copy}{\text{(additional copy is enclosed)}} \frac{160.00 \text{ Filing Fee}, Certificate of Status & Certified Copy}{\text{(additional copy is enclosed)}}
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:

16 FEB - 1 PH 1: 40

ELLIS Tree Service LAWARASSE RORID

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

380 Dove Lane

380 Dove Lane

Mailing Address:

380 Dove Lane

Monticello Fl 32344 Monticello Fl 32344

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:

Name

380 DOVE IAME

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

monticella Florida 32344

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 cerefficate, 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, E.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2



The name and address of each person auth	horized to manage and control the Limited Liability Company:
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:  SECREMANY OF STAR TALLAMASSEE R.ORIE
AMBR	Danny Ellis 380 Dove Lane menticello Fl 32344
(Use attachment if necessary)  CTICLE V: Effective date, if other than the date of	of filing: . (OPTIONAL)
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REOUIRED SIGNAPURE:  REOUIRED SIGNAPURE:  Signature of a metal and	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State