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## **COVER LETTER**

TO:

**Registration Section** 

Di	ivision of Corporations		
CUDIECT	R & L Parking Lot Maintenance		
SUBJECT		Limited Liabilit	y Company
The enclos	ed Articles of Organization and fee(s	) are submitted	for filing.
Please retu	m all correspondence concerning this	s matter to the fo	llowing:
	Lori K. Leis		
		Name of l	Person
	R & L Parking Lot Maintenance		
		Firm/Cor	npany
	1851 A Cane Mill Rd		
		Addre	ss
	Chipley, Florida 32428		
;	rudd88@att.net	City/State and	Zip Code
_	E-mail address: (to be u	sed for future ar	nual report notification)
For further in	nformation concerning this matter, ple	ease call:	
	Lori K. Leisat	850	258-5902
	Name of Person	Area Code	Daytime Telephone Number
Enclosed is	s a check for the following amount:		
\$125.00 Fi	ling Fee \$130.00 Filing Fee & Certificate of Status	LCertifie	Spiling Fee & Spiling Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	1 1 (	Street Address New Filing Section Division of Corporations Clifton Building 1661 Executive Center Circle Fallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:		
R & L Parking Lot Ma (Must end w	intenance, LLC	l Liability Compan	y, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	iress of the principal o	office of the Limite	d Liability Company is:
<u>Principal</u>	Office Address:		Mailing Address:
1851 A Cane Mill Rd Chipley, FL 32428			51 A Cane Mill Rd ipley, FL 32428
ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac	annot serve as its own	Registered Agent.	ent's Signature: . You must designate an individual or
The name and the Florida street ac	dress of the registered	d agent are:	
	Lori K. Leis		
		Name	
	1851 A Cane Mill R		
	Florida street addres	ss (P.O. Box <u>NOT</u>	acceptable)
	Chipley	FL	32428
	City	State	Zip
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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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Lori K. Leis
MOK	1851 A Cane Mill Rd
	Chipley, FL 32428
	3.00); ( 0.0 120
,	
(Use attachment if necessary)	
•	
ICLE V: Effective date, if other than the date	e of filing: April 18, 2016 (OPTIONAL)
ICLE V: Effective date, if other than the date a effective date is listed, the date must be sp	
ICLE V: Effective date, if other than the date a effective date is listed, the date must be spate of filing.)	pecific and cannot be more than five business days prior to or 90 days a
ICLE V: Effective date, if other than the date a effective date is listed, the date must be spate of filing.)  : If the date inserted in this block does not a	pecific and cannot be more than five business days prior to or 90 days a meet the applicable statutory filing requirements, this date will not be list
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Filing Fees:

Lori K. Leis
Typed or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)