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(F	Requestor's Name)	
<u>(A</u>	ddress)	
A)	ddress)	<u>. </u>
(0	city/State/Zip/Phone	
	☐ WAIT	<u> </u>
(E	Business Entity Name	e)
(C	Occument Number)	<u></u>
Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	

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APR 2.7 2016 T. SCOTT



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HOLLYSIDABUS JO HOISTAID JIVIS JO ANNIBERS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Brandon Lee Johns	ian Construction LLC
	Liability Company
The enclosed Articles of Organization and fee(s) are sub-	mitted for filing.
Please return all correspondence concerning this matter to	the following:
0 1 Ti	
Brandon John	500
Na	me of Person
Brandon Lee Johns	
Fi	m/Company
346 Chippewa (\searrow
JIO CHIPOWA L	Address
Al: 111	
Niceville, FL City/St	32578
City/St	ate and Zip Code
gator brando Q y al E-mail address: (to be used for fi	no, com
E-man address: (to be used for it	nure annual report notification)
For further information concerning this matter, please call:	
and the pro	100 100
Brandon Johnson at (850) Name of Person Area Co	
Name of Person Area Co	ode Daytime Telephone Number
Enclosed is a check for the following amount:	
	\$155.00 Filing Fee & \$160.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
, (ad	ditional copy is enclosed) Certified Copy (additional copy is enclosed)
	(additional copy is eliciosed)
Mailing Address	Street Address
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Δ	RT	ורו	F	1 _ 1	Nο	me.
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The name of the Limited Liability Company is:

Brandon Lee Johnson Construction 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:
346 Chippewa Or	346 Chippewa Or
Niceville, FL 32578	Niceville, FL 32578
•	·

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:

Brandon	Johns	n
_	Name	
346 Chipp	ewa Di	r.
Florida street address	(P.O. Box NOT	acceptable)
Niveville	FL	32578
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

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SEGRE JARY OF STAIL

MBR" = Authorized Member	Name and Address:
IGR" = Manager	~ · · · · · · · · · · · · · · · · · · ·
MGR	Brandon Johnson 346 Chippens Or Niceville, FL 32578
	346 Chippenia Or
	1116evine, 1-6 323 / B
<u> </u>	
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se attachment if necessary)	
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filing.)	filing: (OPTIONAL) fic and cannot be more than five business days prior to or 90 et the applicable statutory filing requirements, this date will not State's records.
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\$ 5.00 Certificate of Status (Optional)