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COVER LETTER

TO: Registration Section Division of Corporations	Maintenance			
SUBJECT: Privs Name of Limit	LAWN MATHEREE ed Liability Company			
The enclosed Articles of Organization and fee(s) are s	submitted for filing.			
Please return all correspondence concerning this matt				
Peter's LAND Maintenance Peter's LAND MAINTENANCE Firm/Company				
7 / '	Name of Person Maintenance			
Peter 5	(AND ANTICACE			
	Firm/Company			
5138	BOX WOOD LN			
	Address			
Tallahassu F2 32303				
City/State and Zip Code Puf 2002 @ Jahoo. (on L'-mail address (to be used for future annual report notification)				
E-mail address (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Peter Wood an 850, 766-7075				
Name of Person Are	ca Code Daytime Telephone Number			
Enclosed is a check for the following amount:				
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)			
Mailing Address New Filing Section Division of Corporations P.O. Box 6327	Street Address New Filing Section Division of Corporations Clifton Building			

Tallahassee, FL 32314

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 Liability	Company is:		Mainter	vance	
1	Company is:	0 ~ ~	AAA	17776	LLC
	th the words "Limited Li				
ARTICLE II - Address: The mailing address and street add	ress of the principal offic	e of the Limite	ed Liability Compa	ny is:	
<u>Principal</u>	Office Address:		<u>Mailir</u>	ig Address:	
51381	DUX Would L	.~	Si	me	
Tallak	ASJEL FL	32703			
(The Limited Liability Company e another business entity with an act The name and the Florida street act	tive Florida registration.) dress of the registered ag	ent are:	Word		r
	Florida street address (I	AL A	acceptable)	<u>_</u>	
	Tallah Assee			5	
Having been named as registered ag place designated in this certificate. I further agree to comply with the pro am familiar with and works the obli	hereby accept the appoint visions of all statutes , tha	ument as registi ting to the prop	ered agent and agre per and complete pe	re to act in this cap rformance of my d	nacity_1 luties, and 1
	P	KW	nature (REQUIRE	anni da pangan da di da manandi d	
	Registere	ed Agent's Sigr	nature (REQUIREE	?)	

(CONTINUED)

Page 1 of 2

16 JUN -3 AM 9: 59

	ARTICLE IV- The name and address of each person aut	horized to manage and control the Limited Liability Company:
	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address: Peter Wood 50 5138 Bux Wood LN TALLAMOSICE, FE
· ·	Managil	TALIAMS > 12 , 12 , 36 3)
	,	
	· · · · · · · · · · · · · · · · · · ·	
	(Use attachment if necessary)	
(If an c the dat <u>Note:</u>	effective date is listed, the date must be sp te of filing.)	of filing:
ARTIC	CLE VI: Other provise ins. if any.	
	REQUIRED SIGNATURE:	let Was))-
	This document is execular am aware that any fals constitutes a third degree	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes. e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S. Typed or printed name of signee
		Typed or printed name of signee
		Kiling Frees

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

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)