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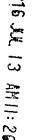
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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Office Use Only



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COYER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PDL, Framing LLC Name of Limited Diability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Payton Drew Lawhon	*
Name of Person	
PDL Construction LLC	
Firm/Company	
433 Woodville Hwy	
Crawfordville FL. 32327	
City/State and Zip Code	
E-mail address: (10 be used for future annual report notification)	٠
For further information concerning this matter, please call:	
Payton Lawlon of 850 545-9839	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	βŢ
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Lia					·
p_{l}) Framing	1.16.			
(Must e	end with the words "Limited Liabi	lity Company, "L.L.C.,"	or "LLC.")		
ARTICLE II - Address: The mailing address and stre	et address of the principal office o	of the Limited Liability C	Company is:		
<u>Prin</u>	cipal Office Address:		Mailing Address:		
933 Wag	idville Hwy	933 w	Voodville Hwy	/	
Crawford	ville FL. 32327	Crawford	ille FL. 3232	27	
•	•				
ADTICLE III Posistand	4 4 Devision 1 OFF P D				
(The Limited Liability Comp	Agent, Registered Office, & Registered sits own Registered	gistered Agent's Signat ttered Agent, You must d	ure: designate an individu	a) or	
(The Limited Liability Comp	Agent, Registered Office, & Repany cannot serve as its own Registan active Florida registration.)	gistered Agent's Signat tered Agent. You must d	.ure: designate an individu	nal or	
(The Limited Liability Companother business entity with	oany cannot serve as its own Regis	tered Agent. You must d	ure: designate an individu	1944	
(The Limited Liability Companother business entity with	eany cannot serve as its own Registan active Florida registration.) reet address of the registered agent Pay Lon Dres	itered Agent. You must d lare: Lawhon	ure: lesignate an individu	A SC	
(The Limited Liability Companother business entity with	any cannot serve as its own Regis an active Florida registration.)	itered Agent. You must d lare: Lawhon	ure: designate an individu	SCORE VALUE OF THE PARTY OF THE	
(The Limited Liability Companother business entity with	pany cannot serve as its own Registan active Florida registration.) reet address of the registered agent Payton Dres Nam 933 Woods	itered Agent, You must de lare; Lawhon The Hwy	designate an individu	ALL AUGUS	
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Having been named as registered agent and to accept service of process for the above stated limited liability correctory in the place designated in this certificate. Thereby accept the appointment as registered agent and agree so act in this espacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of registeres, and I am familiar with and except 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

Title:	_ A	Name and Address:	
"AMBR" = I	= Authorized Member	n' , , , ,	
	Anec	Payton Drew Lawhon	
	. /		
	,	933 Woodville Hwy	
	. ·	Crawfordville, FL. 32327	·
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