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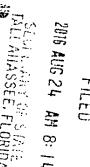
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## COVER LETTER

Registration Section

Div	ision of Corporations
SUBJECT:	CARTER LAWNCARE AND LANDSCAPING, LLC
	Name of Limited Liability Company
The enclosed	d Articles of Organization and fee(s) are submitted for filing.
Please return	all correspondence concerning this matter to the following:
	Matthew H. Carter
	Name of Person
	Carter Lawncare and Landscaping, LLC
_	Firm/Company
	1981 Juniper Creek Rd.
_	Address
	Quincy, FL 32351
	City/State and Zip Code
_	Carterlawncarell@gmail.com  E-mail address: (to be used for future annual report notification)
For further inf	Formation concerning this matter, please call:
_	Matthew H. Carter at (850 ) 8680120
	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fili	ng Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed) (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

## CARTER LAWNCARE AND LANDSCAPING, 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:

1981 Juniper Creek Rd.

1981 Juniper Creek Rd.

Quincy, FL 32351

Quincy, FL 32351

ARTICLE III- Registered Agent, Registered Office, & Registered Agent's Signature:

The Name and the Florida street address of the Registered agent are:

Matthew Harrison Carter

1981 Juniper Creek Rd.

Quincy, FL 32351

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 certified, I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provision 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, Florida Statutes.

MATTHEW HARRISON CARTER

Page One of Two Pages

ARTICLE IV-			
The name and address of each person authorized to mana Company:	ge and control the Lir	nited Liab	oility
<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR"= Manager			
AMBR, MGR	Matthew Harrison Carter		
	1981 Juniper Creek	Rd.	
	Quincy, FL 32351		
ARTICLE V: Effective date, if other than the date of filing:	N/A	IALLAHA	2016 AUG

MATTHEW HARRISON CARTER

**REQUIRED SIGNATURE:** 

(IN ACCORDANCE WITH SECTION 605.0203(1)(b), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER THE PENALITIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.

I AM AWARE THAT ANY FALSE INFORMATION SUBMITTED IN A DOCUMENT TO THE DEPARTMENT OF STATE CONSTITUTES A THIRD DEGREE FELONY AS PROVIDED FOR IN S. 817.155, F.S.)

MATTHEW HARRISION CARTER (Signee)

ARTICLE VI: Other provisions, if any: None.