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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

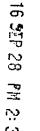
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: All AMERICAN GROUNDS MAINTENANCE Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
ERIC FORESTAC Name of Person ALL AMERICAN CARALLETTALA
ALL AMERICAN GROUNDS MAINTENAN
P. O Box 12365
TACLAHASSEEFC 32317 City/State and Zip Code Collamericangrounds maintegmail. Tum mail audies: (to be used for (lature annual report notification)
For further information concerning this matter, please call:
FRIC FORESTALat (850) 443-7239 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certified Copy Certificate of Status & Cadditional copy is enclosed)} \\ \text{S160.00 Filing Fee, Certified Copy Certified Copy (additional copy is enclosed)}}\\ \text{(additional copy is enclosed)} \\ \text{(additional copy is enclosed)} \end{additional copy is enclosed)}
Mailing Address Street Address

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

ARTICLE	I - Name:	
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The name of the Limited Liability Company is:

ALL AMERICAN GROUNDS MAINTENANCE, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

827 Brook Mann P.O. Box

Tallahassel, FC 323/7

Tallahassee, FC 323/7

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:

ERIC FORESTAL

Name

Plorida street/address (P.O. Box NOT acceptable)

Talangure FL 323/

City State Zip

Having bosse 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 jumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 645, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

16 SEP 28 PH 2: 30

	Title:	Name and Address:
	"AMBR" ≈ Authorized Member	, /
	"MGR" = Manager	CON FORT
	AMBR	EKIL OLOGA
		Brooke Regorall
		10/19/19/16/2011
		
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	(Use attachment if necessary)	
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