

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L16000209555

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: charlesm@cpamassie.com

**FLORIDA LIMITED LIABILITY CO.
Johnson Grading & Excavating, LLC**

Certificate of Status	1
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Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: Johnson Grading & Excavating, LLC

ARTICLE II - Address

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

18060 Elmwood Dr
Alva, FL 33920

ARTICLE III -

Registered Agent, Registered Office & Registered Agents Signature

The name and Florida street address of the registered agent are:

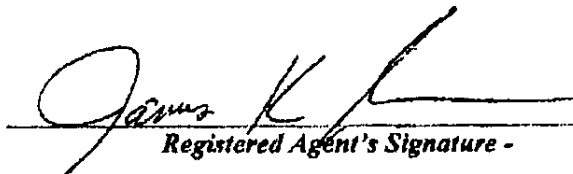
James K Johnson
Name

18060 Elmwood Dr
(P.O. Box or Mail Drop Box NOT acceptable)

Alva FL 33920
(City/State/Zip)

FILED
16 NOV 17 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 -

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ARTICLE IV -

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: Name and Address:
"AMBR" = Authorized Member
"MGR" = Manager
"MGMR" = Managing Member

MGMR James K Johnson, Managing Member
18060 Elmwood Dr
Alva, FL 33920

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TALLAHASSEE, FLORIDA

ARTICLE V -

Effective date, if other than the date of filing: _____
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or authorized representative of a member

(In accordance with section 605.0203(1)(B), Florida Statutes, the execution of this document constitutes an affirmation under the penalties 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.)

James K Johnson
Typed or printed name of signee

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