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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
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EFFECTIVE DATE 02/20/17

De 02/24/17

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: <u>M & M Underground Directional</u> Name of Li	Drilling and Excavation LLC mited Liability Company	
The er	nclosed Articles of Organization and fee(s) a	are submitted for filing.	
Please	return all correspondence concerning this n	natter to the following:	
	Mark Sorrells		
		Name of Person	
		Firm/Company	
	2150 N Highway 181	Address	
	Westville, FL 32464	City/State and Zip Code	
_m	narksorrells16@amail.com	ed for future annual report notifica	ation)
For fu	rther information concerning this matter, ple	ase call:	
<u>Mark</u>	Sorrells at (850) 373-7504 Area Code Daytime Te	lephone Number
Enclos	sed is a check for the following amount:		
\$125.0	00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Centified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Addi Registration Section	ress
	Division of Corporations	Division of Corporat	ions
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Cent	ter Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
M & M Underground Directional Drilling and Excava (Must end with the words "Limited"	tion LLC Liability Company, "L.L.C.," or "LLC")
ARTICLE II - Address: The mailing address and street address of the principal of	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2150 N Highway 181 Westville, FL 32464	2150 N Highway 181 Westville, FL 32464
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration	Registered Agent. You must designate an individual or
The name and the Florida street address of the registered	agent are:
Mark Sorrells	
Name	
2150 N Highway 181 Florida street address (P.O. Box	NOT acceptable)
Westville	FL 32464
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obl	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance igations of my position as registered agent as provided for in er 605, F.S.,
Registered Agent's Signat	urc (REQUIRED)
(CONTINUI	17 F SEIB FALL
Page 1 of 2	SSEC 23

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Mark Sorrells
	2150 N Highway 181
	Westville, FL 32464
	Mike Williams
	1001 Ridgeline St.
	Bonifay, Florida
<u>. </u>	
	·
(Use attachment if necessary) EV: Effective date, if other than the dective date is listed, the date must be of filing.)	ate of filing: Feb. 2017. (OPTIONAL) specific and cannot be more than five business days prior to or 90 or
EV: Effective date, if other than the dective date is listed, the date must be if filing.)	ate of filing: Feb. 20, 2017. (OPTIONAL) specific and cannot be more than five business days prior to or 90 o
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E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any REQUIRED SIGNATURE: Signature of a	member or an authorized representative of a member.
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ARTICLE IV-