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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies		of Status
Special Instructions to	Filing Officer:	
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## COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT: All Construction Name of Lin	nited Liability Company
The enclosed Articles of Organization and fee(s) ar	e submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Richard L. BA	eartly
·	Name of Person
A.C.E.	
	Firm/Company
1705 Kelly	
	Address
TZH. FlA.	32310
He hand Bantly	32310 City/State and Zip Code
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, pleas	se call:
at (	
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	•
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$\text{Certified Copy}\$ (additional copy is enclosed)
·	(222.22.22.22.22.22.22.22.22.22.22.22.22
Mailing Address	Street Address
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	TI	CL	Ε	I	_	N	a	m	e:	
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The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "L.L.C.," or "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:
1705 Kelly	Same
TaH. FIA. 32310	SAME

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:

_	ichard	L. BRAN	111
		ame	
17	105 Kell.	, 5%.	
		.O. Box <u>NOT</u> accept	able)
In	MALASSER	T-Torila	35310
	City	State	Zin

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	P. 1. 1 1 R 41
MGR	Richard L. Brantly
	72H. Fl. 32310
•	
	,
(Use attachment if necessary)	
CLE V: Effective date if other than the date of	of filing: (OPTIONAL)
	nific and counct be more than five business days nation to an 00 days
effective date is listed, the date must be spec	and and cannot be more than five business days prior to or 90 days
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This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)