

217000120138

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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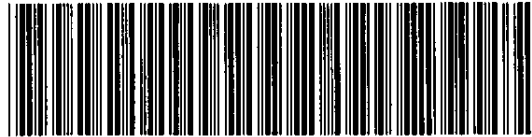
(Business Entity Name)

(Document Number)

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TALLAHASSEE
FLORIDA

LLC

1. ABOUND CONSTRUCTION SERVICES, LLC

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

KLEIN & KLEIN, LLC

Attorneys at Law

40 Southeast 11th Avenue
Ocala, Florida 34471

HARVEY R. KLEIN (1922-2003)
H. RANDOLPH KLEIN
FRED N. ROBERTS, JR.
LAWRENCE C. CALLAWAY, III

PHONE (352) 732-7750
FAX (352) 732-7754

June 1, 2017

**TO: Registration Section
Division of Corporation**

RE: ABOUND CONSTRUCTION SERVICES, LLC

The attached Articles of Organization and fees are submitted for filing.

The following is the email address for the LLC:

kristilovell1@gmail.com

For further information concerning this matter, please call

Joyce Henry at (352) 732-7750

17 JUN -2 PM 12:36
STATE
CLERK
CORPORATION

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

17 JUN -2 PM 12:34
FILE

ARTICLE I - Name:

The name of the Limited Liability Company is:

ABOUND CONSTRUCTION SERVICES, LLC

ARTICLE II - Address:

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

Principal Office Address:

1632 East Silver Springs Boulevard
Ocala, FL 34470

Mailing Address:

1632 East Silver Springs Boulevard
Ocala, FL 34470

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

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

KARIN KRISTI LOVELL
412 SE 19th Avenue
Ocala, FL 34471

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, Florida Statutes.


KARIN KRISTI LOVELL

ARTICLE IV- Manager(s) or Managing Member(s):

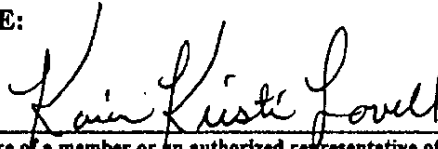
The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"MGR"	Karin Kristi Lovell 412 SE 19 th Avenue Ocala, FL 34471
"MGR"	Russell Branson 1607 Southeast 13 th Street Ocala, FL 34471

17 JUN -2 P.12:36

SFO
T.M.
JL

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with Section 6085.0203(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 in s.817.155, F.S.)

KARIN KRISTI LOVELL

Typed or printed name of signee