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N. SAMS

## **COVER LETTER**

TO: New Filing Section Division of Corporations		· .
SUBJECT: FC Lynn and Name of L	Sons Construction LLC imited Liability Company	•
. The enclosed Articles of Organization and fee(s) a	are submitted for filing.	
Please return all correspondence concerning this r	natter to the following:	See . HER WAR IN KI
Cleveland Lynn	Jr	
	Name of Person	
706 Apache St.	Address	
Tallahassee, F	10rida 32301 City/State and Zip Code	· .
Fclynnand Sons & E-mail address: (to be us		
For further information concerning this matter, plea	ase call:	
Name of Person	Area Code Daytime Telephone Number	No. (Neth pres) (20
Enclosed is a check for the following amount:		
\$125.00 Filing Fee & Sertificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	ed)
Mailing Address  New Filing Section  Division of Corporations	Street Address  New Filing Section  Division of Corporations	•
P.O. Box 6327 Taliahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

FC Lynn and Sons Construction, LLC
(Must/contain 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:		
Cleveland Lynn Jr 706 Afriche St Tallanassee 32301	706 Afache St. Tallahassee, FL 32301		
ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered A another business entity with an active Florida registration.)		SECRETA	T)
The name and the Florida street address of the registered agent are:	1 Jr	SEE, FLO	. Then street in str
706 Apache Florida street address (P.O. Box)	NOT acceptable)	PAIR PAIR	
1911ahassee City State	FL 30/30/		

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)

The name and address of each person authorize	ed to manage and control the Limited Liability Company:		•
Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager	Moveland Jung Tr	1.34	अध्यक्ष अध्यक्ष १ - १
\	706 Amoche St Tollahosse FL 32301		
AMBR	Felecia Luna		
	Tole Apache St Tallahassee, FL 32301		
AMBR	Cedric Lynn		
	706 Apaché St Tallahassee, FL 32.301		
AMBR	Michael Lynn		· :
· .	Tallhassee, FL 32301	<i>:</i> .	
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the date of filli	ng: (OPTIONAL) and cannot be more than five business days prior to or 90	J	•
the date of filing.)	ne applicable statutory filing requirements, this date will not		
the document's effective date on the Department of Sta		. Na	state review (c. )
ARTICLE VI: Other provisions, if any.  Dirase and EIN 82-46415	50	•	
REQUIRED SIGNATURE:			
( Mod)	/ Sylvan / h.		
Signature of a member This document is executed in	or an authorized representative of member. accordance with section 605.0203 (V (b), Florida Statutes.		
I am aware that any false infor	mation submitted in a document to the Department of State my as provided for in s.817.155, F.S.		

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

2010 HAR -5 PH 3: 20
SECRETARY OF STATE
AND ANASSEE, FLORID.

धिक्य क्यांन्य ।