## L1800151927

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone-#)
PICK-UP WAIT MAIL
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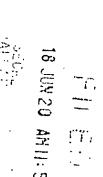
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## COVER LETTER

Divis	Filing Section ion of Corporations
SUBJECT: _	Have y Dess Je. Construction Name of Limited Liability Company
The enclosed	Articles of Organization and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:
	Harry A. Dees Tr. Name of Person
<u> </u>	937 Host owl Hill 60,10
- !	City/State and Zip Code  City/State and Zip Code  City/State and Zip Code  E-mail address: (to be used for future annual report notification)
	Formation concerning this matter, please call:
	Name of Person Area Code Daytime Telephone Number  a check for the following amount:  ing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status  Certificate of Status
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  (additional copy is enclosed)  Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
(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:	
1237 Hoot Owl Hillberg	
70116h 25641/1-6 32312	
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:

Harry Dees Jr.

Name

1937 Hout Owi H:11 Leap

Florida street address (P.O. Box NOT acceptable)

Tall FL 323()

City State Zip

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)

SeCen-

18 JUN 20 AH II:

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Harry Dees 1937 Hoot Owl Hill Coop Tall , FL 3231
(Use attachment if necessary)	
fective date is listed, the date must b	edate of filing:
fective date is listed, the date must be of filing.) If the date inserted in this block does iment's effective date on the Department.  EVI: Other provisions, if any.	not meet the applicable statutory filing requirements, this date will not be ment of State's records.
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