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2020 APR 22 AMII: 4

## COVER LETTER

	ew Filing Section vision of Corporations					
SUBJECT	Dye's Services, LLC					
	Name of	Limited Liabi	lity Company			
The enclose	ed Articles of Organization and fee(s)	are submitte	d for filing.			
Please retu	rn all correspondence concerning this	matter to the	following:			
	John E. Dye					
		Name o	f Person			
	Dye's Services, LLC					
		Firm/C	ompany		202	
	12224 Lake Valley Drive				2020 APR 22	7
		Add	ress		PR 22	!
	Clermont, Florida 34711				3	
		City/State a	nd Zip Code	_	2 AH II: 46	•
<u>.</u>	dyex1@yahoo.com  E-mail address: (to be us	 sed for future	annual report notificat	ion)	<u> </u>	
For further in	iformation concerning this matter, plu					
	John E. Dye		321-1487			
	at   Name of Person	l	) Daytime Telephon	e Number		
	Name of Ceron	Area Code	Daytime rereption	e (vannoe)		
Enclosed is	a check for the following amount:					
<b>]\$</b> 125.00 Fi	ling Fee \$\int \\$130.00 \text{ Filing Fee & Certificate of Status}	└─Certif	00 Filing Fee & [fied Copy nal copy is enclosed)	Certificate Certified C	of Status &	)
	Mailing Address New Filing Section		Street Address New Filing Section			
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Corporati Clifton Building 2661 Executive Center			

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARI	ICLŁ	1 - Name:
-----	------	-----------

The name of the Limited Liability Company is:

2020 APR 22 AM II: 46

(Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC!") " " " > ?!
.E II - Address:	
ing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12224 Lake Valley Drive	same
Clermont, FL 34711	

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

John E. Dye		
	Name	
12224 Lake Valley D	orive	
Florida street add	lress (P.O. Box <u><b>NOT</b></u> ac	ceptable)
Clermont	Florida	34711
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..

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	John E. Dye
inort .	12224 Lake Valley Drive
	Clermont, Florida 34711
<del></del>	
	<del></del>
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date	of filing: (OPTIONAL)
	ecific and cannot be more than five business days prior to or 90 days after
he date of filing.)	
Note: If the date inserted in this block does not not the document's effective date on the Department of	neet the applicable statutory filing requirements, this date will not be listed as of State's records.
arriotett of the tr	
ARTICLE VI: Other provisions, if any.	
· · ·	
REQUIRED SIGNATURE:	$\gamma \rho \in \gamma$
	Ahr Cile
Signature of a my	nyber or an authorized epresentative of a member.
	ed in accordance with section 605.0203 (1) (b), Florida Statutes.
	information submitted in a document to the Department of State efforcy as provided for in s.817.155, F.S.
constitutes a tinta degree	, iclony as provided for in sort street 1 as.
John E. Dye	
	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)