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SECRETARY OF STATE

N CULLIGAN:
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TO:	New Filing Se ∌ivision of Co		tions						•	•	
SUBJI	ECT: Ne4+	Œ	?nere	ation	Cor	stru	tion.	L	LC		
	 			Nam	e of Limi	ted Liabi	lity Cor	npany			,

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Danny Eugene Shores
Name of Person
Firm/Company
rinivCompany
2212 Wiliman Rd
Address*
Cottondale, Fl 32431
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danny Shores at (850) 573-2083

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 & Certified Copy

(additional copy is enclosed)

US160,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

2020 JUL -6 PM 4: 18

SECRETARY OF STATE TALLAHASSEE, FL

Next Generation Corpentry 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:
2212 W.I.Mar Road Cottondale, El 32431	54 ma

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:

Danny EugeneShores

Name

2212 William RJ

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

Coffordale T-1 32431

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)

fered Agent's Signature (REQUIRED)

A	DI	'IC	I L	-11	J.

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	
is CR 2 manager	Danal Flagens Shore
111010	Danny Eugene Shors 1212 Wilmar Rd -Cuttandale, El
	-Cuttondule, El
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(Use attachment if necessary)	
•	
	date of filing:
(If an effective date is listed, the date must be the date of filing.)	e specific and cannot be more than five business days prior to or 90 days after
	of meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Departm	
ARTICLE VI: Other provisions, if any.	
The transfer of the transfer o	
REQUIRED SIGNATURE:	
This document is ex	number or an authorized representative of a member, ecuted 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
	egree felony as provided for in \$.817.155, F.S.
<u></u> D a	Typed or printed name of signee
	Typed or printed name of signee

Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)