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COVER LETTER

TO:	New Filing Section Division of Corporations	
SUBJE	Vinson Handyman Services LLC	
30 D 31.	Name of Limited Liability Co	ompany
The enc	closed Articles of Organization and fee(s) are submitted for f	iling
Please	return all correspondence concerning this matter to the follow	ving:
	George Christopher Vinson	
	Name of Person	on
	Vinson Handyman Services LLC	
	Firm/Compar	jy
	12428 Toucan Drive	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
	Address	A P
	Jacksonville, FL 32223	#21 APR 13
	City/State and Zip	· III
	E-mail address. (to be used for future annua	nl report notification)
or furth	er information concerning this matter, please call:	7. 2
	George Christopher Vinsonat ()	
		aytime Telephone Number
Enclose	ed is a check for the following amount:	
	5.00 Filing Fee \$\Bigcup \Bigcup \\$130.00 Filing Fee \& \Bigcup \Bigcu	Filing Fee & D\$160,00 Filing Fee, opy Certificate of Status & Certified Copy (additional copy is enclosed)
		et Address Filing Section Division
	Division of Corporations The	Centre of Tallahassee 5 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Vinson Handyman Services LLC	
(Must conatin the words "Limited Liab	oility Company, "L.L.C" or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office	e of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
12428 Toucan Drive	12428 Toucan Drive
Jacksonville, FL 32223	Jacksonville, FL 32223

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:

George Christopher	Vinson	
	Name	
12428 Toucan Drive	e	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
Jacksonville	FL	32223
Cuv	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 (REOURED

(CONTINUED)

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ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Mer	Name and Address: ober	
"MGR" = Manager		
AMBR	George Christopher Vinson	
	12428 Toucan Drive Jacksonville, FL 32223	
	Jacksonville, PL 52223	
		
	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
	<u> </u>	
(Use attachment if necessary		
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