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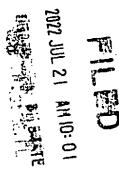
(Re	questor's Name)	
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	,	
PICK-UP	TIAW	MAIL
(Bu	siness Entity Name	)
		<del> </del>
(Do	cument Number)	
Certified Copies	Certificates o	f Status
	-	
Special Instructions to	Filing Officer.	
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Office Use Only



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ALLAHASSEE ; i ne

RECRIVED

## COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: James CAN (in 17) Name of Lumied Liab	ALL HANDY MAN SERVICES LLE
The enclosed Articles of Organization and fee(s) are submitted	ed for filing.
Please return all correspondence concerning this matter to the	following:
JAMES WHITT, NG TE	sd
Name o	of Person
Firm	Company
255 FORK DR	
	iress
WEWEHILLHKA FC. City/State:  DIMMY Whetherston 75	32 465
CHY/State:	+ YAhabliCon
E-mail address: (to be used for future	: annual report notification)
For further information concerning this matter, please call:	
Same 126 otto Water Do To	1. 3482263
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check for the following amount:	
	155.00 Filing Fee &  If ited Copy   If ited Copy   Onal copy is enclosed)   Certified Copy   (additional copy is enclosed)
Mailing Address	Street Address
New Filing Section	New Filing Section Division The Centre of Tulkihasses

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AL	УT	ICI	1 F	1	\'		
741	٠.			, -	٠,	73 11	ю.

The name of the Limited Liability Company is:

Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C."

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
255 FORK DR	NA 0.31 17 167
WEWAHITCKIA, EL 32465	P.O. BOX 13597 MEXICO BOALG PL

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:

JAMES WI	SITTING	180
:	Same	
255 FORK P	R	
Florida street address (		T acceptable)
WOWAHITEHEA	<u> El</u>	32465
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. Thereby 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)

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
maa	TAMES & Whistonglow
	75860AH OR
	JAMES & Whistonglow  255 Perh PR  WOWAHTHERA PL 3244
AMBR.	JAMOS A WhittingTow
	PROSEX 13597
	MEX: CO BENCH F. 32410
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than	the date of filing: $\frac{0.7/2.1/2.2}{0.000000000000000000000000000000000$
(If an effective date is listed, the date mu	ist be specific and cannot be more than five business days prior to or 90 days after
the date of filing.)  Note: If the date inserted in this block do	oes not meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Dep	
ARTICLE VI: Other provisions, if any,	
<del> </del>	
REQUIRED SIGNATURE:	
· ame	s Whith !
// Signature	e of a member or afi authorized representative of a member.
I am aware that	is executed in accordance with section 605.0203 (1) (b). Florida Statutes, any false information submitted in a document to the Department of State
constitutes a thi	rd degree felony as provided for in s.817.155, F.S.
JAM	Typed or printed name of signee
· <del></del>	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)

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