L23000388569

(Requestor's Name)
(Address)
· · · · · ·
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusiness Sarity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



500413248285

98/21/23--91901--003 **180.00

2023 AUG 18 PH 4: 18
ALLAHASSEE, FLORIN

LECRIVED

(1123 · 1) P 7: 0

COVER LETTER

TO:

New Filing Section Division of Corporations

SUBJECT: TP3/A11-N-ONE Name of Lim	Contracting LLC nited Liability Company	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Tyrone P. Hman		
<i>(</i> -	Name of Person	
	Firm/Company	
CUDA V. D. L	# Aug	
SILL CODKS Road	Address	
Tallahassee Fl, 3	ity/State and Zip Code mail. Com for future annual report notification)	
Ci	ity/State and Zip Code	
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please		
Tyrone Pittman 1118	(SO) 694-4777 ca Code Daytime Telephone Number	
Name of Person Ar	ea 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 & □\$160.00 Fil Certified Copy (additional copy is enclosed) □ Certified Copy (additional copy	Status &
Mailing Address	Street Address	
New Filing Section	New Filing Section Division	
Division of Corporations P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
r.O. 110x 0527 Tallahassee, FL 32314	Tallahasson, FL 32303	

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:
5/12 Cooks Rd #4/	5112 Cooks Rd Hyll Ta lla hasse Fl 32308
majorphy) (+ / /) JEJU)	14/14/10500/1, 52505

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:

Tyrone /	Offmar	
,	Name	
5/12 Coo	Ks road	#41
Florida street addre	ss (P.O. Box <u>NOT</u> ac	rceptable)
Tallahass	ree Fl,	323 <i>U</i> S
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)

ARTICLE IV-

1. 1. 1. 1.

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

"AMBR" = Authorized Member "MGR" = Manager Light Pool Light Pool MGR M	# <i>U]</i> 32305
	//ma #4/ 12305
MGR Monica maddo	<u>/</u> 33.3
(Use attachment if necessary)	
Note: If the date inserted in this block does not meet the applicable statutory filing require he document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any.	ments, this date will not be listed as
·	
REQUIRED SIGNATURE:	
REOURED SIGNATURE: Junce Junce Mignature of a member or an authorized representative of This document is executed in accordance with section 605,0203 (I am aware that any false information submitted in a document to the constitutes a third degree felony as provided for in 8 817,155, F.S. Tyrone Typed or printed name of signee	l) (b), Florida Statutes,
Typere Times Agnature of a member or an authorized representative of a member or an authorized representative of this document is executed in accordance with section 605,0203 (I am aware that any false information submitted in a document to a constitutes a third degree felony as provided for in 8.817,155, F.S.	l) (b), Florida Statutes, he Department of State