

L97000001041

TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Professional Lawn Treatment LC
(Proposed limited liability company name - must include suffix)

000002290000--1
-09/18/97--01045--001
***285.00 ***285.00

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit
\$ 35.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50. Please send one check for the total amount made payable to the Florida Department of State.

FROM: Margaret Williams
Name (Printed or typed)

PO Box 15714
Address

Tampa FL 33684-5714
City, State & Zip

813-881-1800
Daytime Telephone number

Name	9/18/97
Availability	DCC
Document	
Examiner	DCC
Checker	DCC
Editor	DCC
Approval	DCC
Signature	DCC
Verifier	DCC

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97 SEP 18 AM 11:30
DIVISION OF CORPORATIONS
FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Professional Lawn Treatment LC

ARTICLE II - Address:

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

(m) POBox 15714 Tampa Fl 33684

(s) 9126 Suffield Court Tampa Fl 33615

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

perpetual

ARTICLE IV - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

- ① Margaret Williams 9126 Suffield Ct Tampa Fl 33615
- ② Peter Coleman 12237 Hidden Brook dr Tpa Fl 33624
- ③ Frank Scetini 3216 Sandspur dr Tpa Fl 33618

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____
Professional Lawn Treatment LLC deposes and says:

1) the above named limited liability company has at least two members

2) the total amount of cash contributed by the member(s) is

3) if any, the agreed value of property other than cash contributed by member(s) is \$ _____
A description of the property is attached and made a part hereto.

4) the amount of cash or property anticipated to be contributed by member(s) is \$ _____

5) the total amounts of 2, 3 and 4 is

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TALLAHASSEE, FLORIDA
\$ 7000.00
\$ 000.00
\$ 7000.00

Margaret Williams

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

Professional Lawn Treatment Lc

2. The name and address of the registered agent and office is:

Margaret Williams
(NAME)

9126 Suffield Court
(P. O. Box NOT ACCEPTABLE)

Tampa Fl 33615
(CITY/STATE/ZIP)

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TALLAHASSEE, FLA.

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.

Margaret Williams
(SIGNATURE)

Aug 28, 1997
(DATE)

Filing Fee: \$ 35 for Designation of Registered Agent