L22000016897

(Requestor's Name)				
(Address)				
(Address)				
(Addiess)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Name			
(Document Number)				
(50	cument Number			
Certified Copies	_ Certificates o	of Status		
Special Instructions to	Filing Officer:			
•	J			
		1		

Office Use Only



600379331516

01/14/22--01007--009 **130.00

1022 JAN IL AMIII

TALLAHASSE, STATE

COVER LETTER

SUBJECT: PAULK CONTRACTING LLC					
Name of Limited Liability Company					
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Earnest J. Pwlk TH LLC Name of Person					
Name of Person					
PAULK CUNTracting					
Firm/Company					
13989 Country Rd. 136					
Live 0014, FL 32060					
Live Oak, FL 32060 City/State and Zip Code e.j. Paul (Comail. Com E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used Gr future annual report notification)					
For further information concerning this matter, please call:					
Eannest Foulk, 904, 955-8215					
Name of Person Area Code Daytime Telephone Number					
Enclosed is a check for the following amount:					
□S125.00 Filing Fee Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)					

Mailing Address

New Filing Section Division of Corporations

TO:

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

<u>Street Address</u> New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of t	he Limited Liability Co	mpany is:	
Ï		Contracting	
	(Must contain th	ne words "Limited Liability Company, L.L	C.," or "LLC.")
ARTICLE II The mailing a		ss of the principal office of the Limited Liab	oility Company is:

Principal Office Address:	Mailing Address:
13989 CR 136 LIVE Dals, 1=6 32060	13989 County Rd. 136 Live Ox14, 186 32060
ADTICLE III. Durintennal America Durintennal Office. S. Dordet	

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:

| Ecrnest J. Paulk 74 | ARC | AR

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-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ _. (OPTIONAL) (If an effective date is listed, the date must 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 does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE Signature of a member or an authorized representative of a member.

Filing Fees:

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, 1 am aware that any false information submitted in a document to the Department of State

Lyped or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)