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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

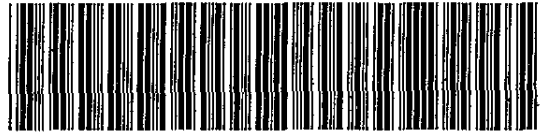
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DIVISION OF CORPORATIONS

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1/16/04

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RASO PAINTING CONTRACTORS, 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:

FRANK J. RASO
(Name of Person)

RASO PAINTING CONTRACTORS, LLC
(Firm/Company)

2548 LALIQUE CIRCLE
(Address)

PALM BEACH GARDENS, FL - 33410
(City/State and Zip Code)

For further information concerning this matter, please call:

FRANK RASO at (561) 818-9946
(Name of Person) (Area Code & Daytime Telephone Number)

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DIVISION OF CORPORATIONS
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STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

RASO PAINTING CONTRACTORS, LLC

ARTICLE II - Address:

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

Principal Office Address:

2548 LA LIQUE CIRCLE
PALM BEACH GARDENS
FL. 33410

Mailing Address:

2548 LA LIQUE CIRCLE
PALM BEACH GARDENS
FL. 33410

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

SUE ANN RASO

Name

2548 LA LIQUE CIRCLE

Florida street address (P.O. Box **NOT** acceptable)

PALM BEACH GARDENS FLORIDA 33410

City, State, and Zip

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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 608, Florida Statutes..

Sue Ann Raso
Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

FRANK J. RASO
2548 LANIQUE CIRCLE
PALM BEACH GARDENS, FL-33410

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Frank J. Raso

Signature of a member or an authorized representative of a member.

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

FRANK J. RASO

Typed or printed name of signee

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DIVISION OF CORPORATIONS
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Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)