

LD70000032579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

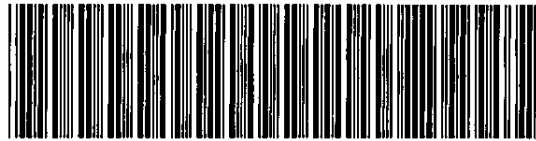
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Butler Plastering 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:

Robert Butler
(Name of Person)

Robert Butler Plastering LLC
(Firm/Company)

6013 Country Walk Lane
(Address)

Winter Haven, FL 33880
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Butler at (863) 299-5040
(Name of Person) (Area 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 & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Organization for

Butler Plastering LLC

ARTICLE I – Name

The name of the Limited Liability Company is Butler Plastering LLC.

ARTICLE II – Address

The mailing address of the Limit Liability Company is 6013 Country Walk Lane, Winter Haven, FL 33880. The principal office address of the Limited Liability Company is 6013 Country Walk Lane, Winter Haven, FL 33880.

ARTICLE III – Registered Agent, Registered Office

The name and the Florida street address of the registered agent are Robert Butler, 6013 Country Walk Lane, Winter Haven, FL 33880.

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, F.S.

x 
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:

MGR:
Robert Butler
6013 Country Walk Lane
Winter Haven, FL 33880

MGRM:
Jeremy Kemp
6013 Country Walk Lane
Winter Haven, FL 33880


MGRM:
Carlos Martinez
6013 Country Walk Lane
Winter Haven, FL 33880

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Butler

ARTICLE V – Effective Date

The effective date of this limited liability company is ____ day of _____, 2007.

x 
Signature of a member or an authorized

Representative of a member.

x Robert Butler
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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