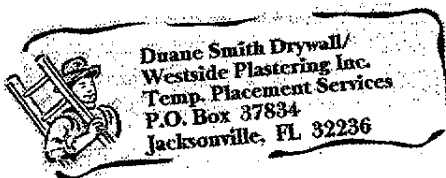


# L010000007903



City/State/Zip

Phone #

**MJH**

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. 00789 - 00167 - 00  
(Corporation Name) (Document #)
2. NA  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

FILED  
01 MAY 16 PM 5:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

100004012031--2  
-04/17/01--01014--015  
\*\*\*\*160.00 \*\*\*\*160.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

March 20, 2001

DUANE SMITH  
P.O. BOX 37834  
JACKSONVILLE, FL 32236

SUBJECT: DUANE SMITH DRYWALL  
Ref. Number: W01000006327

We have received your document for DUANE SMITH DRYWALL, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

You must complete the attached application, the one submitted is smudged and not filmable. You must put the name of the LLC in Article I - Name.,

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

The document must contain both the street address of the principal office and the mailing address of the entity.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges  
Document Specialist

Letter Number: 501A00016904



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 20, 2001

DUANE SMITH  
P.O. BOX 37834  
JACKSONVILLE, FL 32236

SUBJECT: DUANE SMITH DRYWALL  
Ref. Number: W01000006327

We have received your document for DUANE SMITH DRYWALL and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the name of the company in Article I.,

The document must contain both the street address of the principal office and the mailing address of the entity.

\* A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges  
Document Specialist

Letter Number: 501A00016904



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 2, 2001

DUANE SMITH  
P.O. BOX 37834  
JACKSONVILLE, FL 32236

SUBJECT: DUANE SMITH DRYWALL  
Ref. Number: W01000006327

We have received your document for DUANE SMITH DRYWALL and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges  
Document Specialist

Letter Number: 501A00016904

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Duane Smith Drywall Staffing, LLC

## ARTICLE II - Address:

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

4650 Merrimac Ave  
Jacksonville, FL 32210

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

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

Duane Smith  
Name  
4650 Merrimac Avenue  
Florida street address (P.O. Box NOT acceptable)  
Jacksonville FL 32210  
City, State, and 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 608, F.S..*

*Duane Smith*  
Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

*Duane Smith*  
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.)

Duane Smith  
Typed or printed name of signee

### 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)

FILED  
01 MAY 16 PM 5:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA