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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: MARY ANDY'S BARRICADES 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:
MARY ANNE MOSSIEY (Name of Person)
MARY ANDY'S BARRICANES (Firm/Company)
2335 AMBROSE LANE (Address)
PORT CHARLOTTE FL 33952 (City/State and Zip Code)

For further information concerning this matter, please call:

Registration Section

(Name of Person) (Area Code & Daytime Telephone Number)

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 Taliahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: MARY ANDY'S BARRICADES LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2335 AMBRUSE LANE

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

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

2335 AMROSE LANE
Florida street address (P.O. Box NOT acceptable)

PORT CHARLOTTE FL 33952
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..

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	FRED A. MUSELEY 2335 AMBROSS LANE PORT CHARLOTTE, FL 33952
MGLM	FRED E. SEEGERS 181 W. TARPON BLUD PORT CHARLOTTE, FL 3395)
(Use attachment if necessary)	
`	added if an effective date is requested.
REQUIRED SIGNATURE:	- ·
(In accordance with sect	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury on are true.)
MARY AN	ed 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)

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