

LO3 000046298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LO3-46298  
OR

EFFECTIVE DATE  
1-1-04

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

EFFECTIVE DATE: 01-01-04

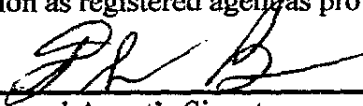
ARTICLE I – The Name of the Limited Liability Company is:  
HANKINS PAINTING, LLC

ARTICLE II – PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS  
490 TREMONT AVENUE SW  
PALM BAY, FL. 32908

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

The name and Florida street address of the registered agent is:  
FRANK BRUNN  
407 EAST NEW HAVEN AVENUE  
MELBOURNE, FL. 32901-4507

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.

  
\_\_\_\_\_  
Registered Agent's Signature

11-5-3  
\_\_\_\_\_  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLE IV – LIMITED LIABILITY PURPOSE IS ANY LAWFUL PURPOSE

ARTICLE V – MANAGING MEMBERS NAME AND ADDRESS  
JOHN B. HANKINS  
490 TREMONT AVENUE SW  
PALM BAY, FL. 32908

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

JOHN B. HANKINS  
\_\_\_\_\_  
Typed or printed name of signee

11-18-03  
\_\_\_\_\_  
Date

EFFECTIVE DATE  
1-1-04