

**L03000046671**Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 205-0383

## From:

Account Name : ARLENE F. AUSTIN, P.A.  
Account Number : I20000000066  
Phone : (239) 514-8211  
Fax Number : (239) 514-4618

EFFECTIVE DATE

11-20-03

## LIMITED LIABILITY COMPANY

Amundson All Surface Repair &amp; Recolor, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

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DIVISION OF CORPORATIONS

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**ARTICLES OF ORGANIZATION OF  
AMUNDSON ALL SURFACE REPAIR & RECOLOR, LLC  
A LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — Name & Address**

The name of the Limited Liability Company is: AMUNDSON ALL SURFACE REPAIR & RECOLOR, LLC.

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

1287 Illinois Drive  
Naples, FL 34103

**EFFECTIVE DATE**

11/20/03

**ARTICLE II — Duration:**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE III — Purpose:**

The purpose for the Limited Liability Company shall be to operate a bath tub and countertop installation business and to engage in the transaction of any and all business activities permitted under the laws of Florida and the United States of America.

**ARTICLE IV — Management:**

The Limited Liability Company is to be managed by the members and the name and address of the managing member is:

Michael D. Amundson  
P.O. Box 7761  
Naples, FL 34101

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**ARTICLE V — Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be by consent of a majority of the members.

**ARTICLE VI — Members' Rights to Continue Business**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be by consent of a majority of the members.

**ARTICLE VII — Effective Date**

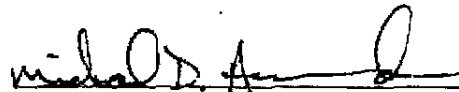
The term of this company shall be effective on November 20, 2003.

**ARTICLE VIII - Resident Agent**

The name of the initial registered agent and the Florida street address of the registered agent and office shall be:

Arlene F. Austin  
5811 Pelican Bay Blvd., Suite 201  
Naples, FL 34108

IN WITNESS WHEREOF, the undersigned has signed these Articles of Organization and acknowledged them to be his free act on this 20<sup>th</sup> day of November, 2003.



Michael D. Amundson, Member

State of Florida  
County of Collier

On November 20, 2003, Michael D. Amundson, who is personally known to me [ ], or produced a Florida driver's license as identification [ XX ], personally appeared before me at the time of notarization, and acknowledged signing these Articles of Organization of Amundson All Surface Repair & Refinish, LLC, a Florida Limited Liability Company.



Notary Public: Arlene F. Austin

Commission Expiration Date & Commission Number:

(SEAL)

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Arlene F. Austin  
Commission # DD223263  
Expires Aug. 8, 2007  
Bonded Thru  
Atlantic Bonding Co., Inc.

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CLERK OF DISTRICT COURT  
NORTH DAKOTA  
FALLS

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA  
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE  
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND  
REGISTERED AGENT IN THE STATE OF FLORIDA.**

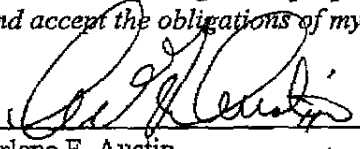
1. The name of the Limited Liability Company is:

AMUNDSON ALL SURFACE REPAIR & RECOLOR, LLC

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

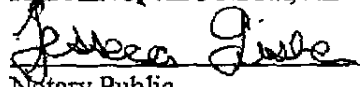
Arlene F. Austin  
5811 Pelican Bay Blvd., Suite 201  
Naples, FL 34108

*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.*

  
Arlene F. Austin  
Registered Agent

State of Florida  
County of Collier

On November 20, 2003, Arlene F. Austin, designated above as the individual who shall serve as the company's initial registered agent, who is personally known to me [ XX ], or produced a Florida driver's license as identification, personally appeared before me at the time of notarization, and acknowledged signing these Articles of Organization of AMUNDSON ALL SURFACE REPAIR & RECOLOR, LLC, as resident agent.

  
Notary Public  
Jessica Fisher  
(Notary Public - Printed Or Typed Name)  
Commission Expiration Date & Commission Number:

(SEAL)

Florida Driver's License  
Identification



Jessica Fisher  
My Commission DD038473  
Expires July 04 2005

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