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Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (305) 674-3313  
Fax Number : (305) 675-2811

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TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATION

**LIMITED LIABILITY COMPANY**

**COUNTRY SIDE PAINTING, LLC**

Certificate of Status	0
Certified Copy	0
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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY  
COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

COUNTRY SIDE PAINTING, LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability

200 ASHLEY LANE

OLDSMAR, FL 34677

ARTICLE III REGISTERED AGENT, REGISTERED  
OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent

WILLIAM P. FERGUSON

200 ASHLEY LANE

OLDSMAR, FL 34677

Having been named as registered agent to accept service of process for the above stated 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..



Registered Agent's Signature

ARTICLE IV MANAGEMENT

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

ARTICLE V MEMBERS (optional)

Managing Member : WILLIAM P. FERGUSON

200 ASHLEY LANE

OLDSMAR, FL 34677

Managing Member : SUSAN M. FERGUSON

200 ASHLEY LANE

OLDSMAR, FL 34677

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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.

WILLIAM P. FERGUSON

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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