

Division of Corporations Public Access System

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LIMITED LIABILITY COMPANY

Brushworks, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
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DIVISION OF CORPORATION

12/1/03

#### Audit # H03000326532

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I

#### Name and Address

The name of this Limited Liability Company is:

Brushworks, LLC

The mailing address and street address of the Limited Liability Company are:

7135 Sugar Magnolia Ct. Naples, FL 34109

# ARTICLE II Term of Existence

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

# ARTICLE III Purpose and Powers

This Limited Liability Company is organized for the purpose of transacting any and all awful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

#### ARTICLE IV

#### Powers

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

<sup>•</sup> This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3249 W Cypress St., Suite C. Tampa, FL 33607, (813)-875-1333.

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## ARTICLE V Initial Registered Office and Agent

The street address of the initial registered office of this Limited Liability Company is:

7335 Sugar Magnolia Ct. Naples, FL 34109

and the name of its registered agent at such address is:

Gary Abernathy

ARTICLE VI Management

This Limited Liability Company shall have One manager(s), and is the efore, a managermanaged Company. The name and address of the manager(s) are:

#### Name and Address

Gary Abernathy 7135 Sugar Magnolia Ct. Naples, FL 34109

Dated: Monday, December 01, 2003

Pary Aberrathy

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#### ACCEPTANCE BY REGISTERED AGENT

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.

Date: December 1, 2003

FILED

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SECRETARY OF STATE
ANTLAHASSEE, FLORIDA