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(Re	equestor's Name)	
(Ac	(dress)	
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(Ci	ty/State/Zip/Phone	#)
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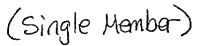
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SECRETARY OF BLACK
ALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

	ration Section on of Corporations			
SUBJECT:	JIM PRUNTY DRYWALL SERVICES, LLC			
	(Name of Limited Liability Company)			
The enclosed A	rticles of Organization and fee(s) are submitted for filing.			
	Please return all correspondence concerning this matter to the following:			
	James M. Prunty			
	(Name of Person)	TAT S		
	JIM PRUNTY DRYWALL SERVICES, LLC	ECR	03 DEC I	കു
	(Firm/Company)	ASS.	3	****
	5840 S.W. 57th Way	338 4\		
<del>-,,</del>	(Address)		PM 12:	
	Davie, FL 33314	E ORIDA	5	
	(City/State and Zip Code)	Σ>.		
For further info	rmation concerning this matter, please call:			
Carmela	A. Prunty at ( 954 ) 961-6001			_
	(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 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY (Single Member)



	JIM PRUNTY	DRYWALL SERVICES, LLC
ARTICLE II - Add	ress:	
The mailing address	and street address of	of the principal office of the Limited Liability Company is:
Principal Office Ad	dress:	Mailing Address:
5840 S.W. 57		5840 S.W. 57th Way C
Davie, FL 3	3314	Davie, FL 33314 37 5
		SON TO PERSON TO THE PERSON TH
ARTICLE III - Rec	vistered Agent Res	gistered Office & Registered Agent's Signature
ARTICLE III - Reg The name and the Fl	gistered Agent, Reg	gistered Office, & Registered Agent's Signature of the registered agent are:
ARTICLE III - Reg The name and the Fl	gistered Agent, Reg orida street address	gistered Office, & Registered Agent's Signature of the registered agent are:
ARTICLE III - Reg The name and the Fl	gistered Agent, Resorida street address  James M. P	of the registered agent are:
ARTICLE III - Reg	orida street address	of the registered agent are:
ARTICLE III - Reg The name and the Fl	orida street address	runty Name
ARTICLE III - Reg	James M. P. 5840 S.W.	runty Name

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, Florida Statutes..

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): (Single Member LLC) The name and address of each Manager or Managing Member is as follows:				
Title: "MGR" = Manager MGRM" = Managing Member	Name and Address:			
James M. Prunty	5840 S.W. 57th Way, Davie, FL 33314			
	AS 08			
	AHASSEL			
(Use attachment if necessary)				
	added if an effective date is requested.			
(In accordance with section 608.	uthorized representative of a member.  408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)			
James M. Pr				

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)