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### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222 7

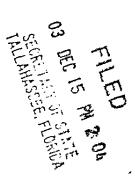
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	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
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	Corp Record Search
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#### ARTICLES OF ORGANIZATION

#### **FOR**

#### AL A. ADKISON PAINTING, L.L.C.



ARTICLE I - Name:

The name of the Limited Liability Company is: AL A. ADKISON PAINTING, L.L.C.

ARTICLE II - Address:

The mailing address is P. O. Box 691, Arcadia, FL 34265, and the street address of the principal office of the Limited Liability Company is: 2693 NW Lansing Drive, Arcadia, FL 34266

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

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

Vincent A. Sica 10 S. DeSoto Avenue, Suite 101 Arcadia, FL 34266

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

IN WITNESS WHEREOF, the undersigned has signed these Articles of Organization on this /a+k day of December, 2003.

AL A. ADKISON

(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.)

## STATE OF FLORIDA COUNTY OF DESOTO

Before me personally appeared AL A. ADKISON to me well known and known to me to be the person described in and who executed the foregoing Articles of Organization and acknowledged to and before me that he executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal this /a+L day of December, 2003.

(SEAL)

\* #DD045394

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\*\*DD045394

\*\*DD045394

\*\*THE CANADA STATE CHARMAN

Notary Public. State of Florida