

L03000054389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

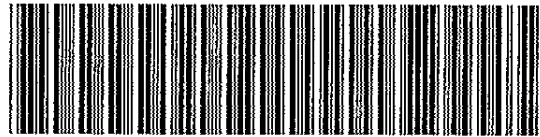
(Business Entity Name)

(Document Number)

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FILED
2003 DEC 12 AM 9:18
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN DEC 19 2003

Robert Thieman
325 SE 11 Terrace Apt 301
Dania, Florida 33004
December 10, 2003

FILED
2003 DEC 12 AM 9:18
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Registration Section
Division of Corporations
409 E Gaines St
Tallahassee, Florida 32399

I am submitting a check for \$125 for filing fee and designation of registered agent. My cell phone is 954-805-3847, home phone 954 925-7754. My mailing address is 325 SE 11 Terrace Dania, Florida 33004.

Thank you for your help in this matter.

Sincerely,



Robert Thieman

/lt

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bob Thieman Painting LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Thieman

(Name of Person)

Bob Thieman Painting LLC

(Firm/Company)

325 SE 11 Terrace Apt 301

(Address)

Dania Beach, Florida 33004

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Thieman

(Name of Person)

at (954) 805-3847

(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

FILED
2003 DEC 12 AM 9:18
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
2003 DEC 12 AM 9:18
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bob Thieman Painting LLC

ARTICLE II - Address:

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

Principal Office Address:

325 SE 11 Terrace

Dania, Florida 33004

Mailing Address:

Same

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

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

Robert Thieman

Name

325 SE 11 Terrace Apt 301

Florida street address (P.O. Box **NOT** acceptable)

Dania, Florida 33004

FLORIDA

City, State, and Zip

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..


Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

<u>MGR</u>	<u>Robert Thieman</u>
	<u>325 SE 11 Terrace Apt 301</u>
	<u>Dania, Florida 33004</u>
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(Use attachment if necessary)

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TALLAHASSEE, FLORIDA

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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.)

Robert Thieman

Typed or printed name of signee

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)