

L03 0000 56272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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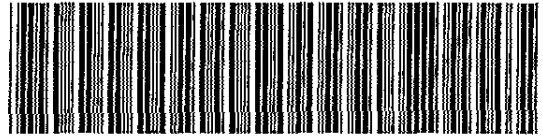
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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L03-56272
AR

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BOB BURNS, TRIM CARPENTER, LLC

The enclosed Articles of Organization and fee(s) are
submitted for filing:
Please return all correspondence concerning this matter to
the following:

CAROL BURNS
(Name of Person)

BOB BURNS, TRIM CARPENTER, LLC
(Firm/Company)

2807 E. Lloyd St
(Address)

Pensacola, FL 32503
(City/State and Zip Code)

For Further information concerning this matter, please
call:

CAROL BURNS at (850) 433-3815
(Name of Person) (Area Code & Daytime Phone #)

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-NAME:

The name of the Limited Liability Company is:
BOB BURNS, TRIM CARPENTER, LLC

ARTICLE II-ADDRESS:

Principal Office Address:
2807 E. Lloyd St, Pensacola, FL 32503

Mailing Address:
2807 E. Lloyd St, Pensacola, FL 32503

ARTICLE III-

Registered Agent, Registered Office, & Registered Agent's
Signature:

CAROL BURNS
(Name)

2807 E. Lloyd St
(Florida street address-P.O. Box NOT acceptable)

Pensacola, FL 32503
(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 obligation of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Carol Burns
(Registered Agent's Signature)

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TALLAHASSEE, FLORIDA

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

Title:

Name and Address:

MGR

BOB BURNS (ROBERT J., JR)

2807 E. Lloyd St, Pensacola, FL 32503

MGRM

CAROL BURNS

2807 E. Lloyd St, Pensacola, FL 32503

(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.)

Bob Burns

(Signature)

BOB BURNS (ROBERT J., JR)

(Typed or printed name of signer)

Carol Burns

(Signature)

CAROL BURNS

(Typed or printed name of signer)

(Signature)

(Typed or printed name of signer)

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TALLAHASSEE, FLORIDA

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Individual Acknowledgment

State of Florida

County of Essex

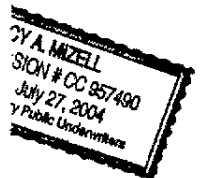
On this 14 day of December 2003 before me, the undersigned notary public, personally appeared Carol Burns, known to me to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained.

Stacy A. Mizell
Notary Public



 Personally known OR

✓ Produced ID – Type of ID FEDL BLS 2.118.50715.0



SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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