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TRANSMITTAL LETTER

MANDALLIAD DELLER		
TO: Registration Section Division of Corporations		
SUBJECT: Professional Drywell Service LLC (Name of Limited Liability Company)		
(Name of Limited Liability Company)		
SUBJECT: Trade State Drywell Service (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: (Name of Person)		
Please return all correspondence concerning this matter to the following:		
Tse Dowc IT (Name of Person)		
(Name of Person)		
一		
(Firm/Company)		
Po Box 140 / 40 Helenas St. Stmanls (Address)		
F/ 32362		
(City/State and Zip Code)		
(y,)		
For further information concerning this matter, please call:		
(Name of Person) at (850) 933-1215 (Area Code & Daytime Telephone Number)		
(Name of Person) at (853) 933-/2)5 (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET ADDRESS: — MAILING ADDRESS:		
Registration Section Registration Section		
Division of Corporations Division of Corporations		
409 E. Gaines Street P.O. Box 6327		

Tallahassee, Florida 32314

Tallahassee, Florida 32399

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
FLORIDA LIIVII IED LAADILAT I CONTAINI
ARTICLE I - Name:
The name of the Limited Liability Company is:
Professional Drywall Service LLC From
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
The instance and one of deep actions of the principal of the Diameter Diameter Diameter Company 15.
Principal Office Address: Mailing Address:
40 Helena St = PU Box 140
St. Marks, Fl. Wwdrille
32355 = Fl. 32362
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Joe Douell
Name
40 Helena Sti
Florida street address (P.O. Box NOT acceptable)
St. Marks - FLORIDA 32355 -

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..

City, State, and Zip

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member

(Use attachment if necessary)

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.)

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)