

LD4000006636

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(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

LD4-473

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

January 6, 2004

MARIO GIRAIDO  
539 GREEN BRIAR BLVD.  
ALTAMONTE SPRINGS, FL 32714

SUBJECT: GIRAIDO'S PAINTING LIMITED LIABILITY COMPANY  
Ref. Number: W0400000473

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for GIRAIDO'S PAINTING LIMITED LIABILITY COMPANY and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the names and street addresses of the members or managers of the limited liability company.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 304A00000581

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

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JULIUS H. INCORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

GIRARDS PAINTING Limited Liability COMPANY

**ARTICLE II - Address:**

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

Principal Office Address:

Mailing Address:

539 Green Briar Blvd  
Altamonte Spgs FL 32714

539 Green Briar Blvd  
Altamonte Spgs FL 32714

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

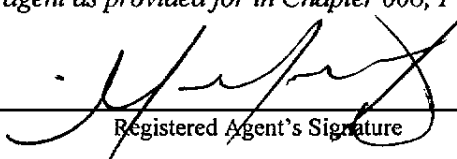
The name and the Florida street address of the registered agent are:

MARIO GIRARDO  
Name

539 Green Briar Blvd  
Florida street address (P.O. Box **NOT** acceptable)

Altamonte Spgs FLORIDA 32714  
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:**

\_\_\_\_\_

MGR

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MARIO GIRALDO

539 Green Briar Blvd

Altamonte Sprs 32717

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(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.)

MARIO GIRALDO  
\_\_\_\_\_  
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)

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TALLAHASSEE, FLORIDA