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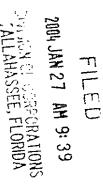
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: STEVE PURKEY PAINTING Lab.C. (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:		
STEVEN D. PURKEY (Name of Person)		
STEUE PURKEY PAINTING FIRM/Company)		
(Firm/Company)		
5607 S.W. CHEROKEE ST.		
(Address)		
PALM CITY, FL 34990 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Steve Purkey at 772 260 9034 cell/days (Name of Person) at (772 260 Postime Telephone Number) HM/FAX 772-287-9700		

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





ARTICLE I - Name: The name of the Limited Liability Company is:	
STEVE PURKEY	PAINTING LLC
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5607 S.W. CHEROKEE ST.	5607 S.W. CHEROKEE ST.
PALM CITY, PL 34990	PALM CITY, FLO 34990
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register	
STEVEN D. PUR Name	RKEY
Florida street address (P.O. Box N	
PALM CITY FI	ORIDA 34990

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)

AND AND SECONDARY The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR. (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: 11MM Signature of a member or an authorized popresentative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution

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

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)

of this document constitutes an affirmation under the penalties of perjury

VEN D. PURKE Typed or printed name of signee

that the facts stated herein are true.)