

L04 0000 11661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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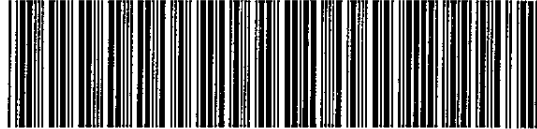
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE

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TALLAHASSEE, FLORIDA

2/12
[Signature]

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MARTIN CARR 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:

EFFECTIVE DATE

2-1-04

THOMAS MARTIN CARR
(Name of Person)

MARTIN CARR PAINTING, LLC
(Firm/Company)

3438 ORLANDO RD.
(Address)

PANAMA CITY, FL 32405
(City/State and Zip Code)

For further information concerning this matter, please call:

CONNIE THARPE at (850) 785-4412
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

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

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE

2-1-04

MARTIN CARR PAINTING, LLC

ARTICLE II - Address:

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

Principal Office Address:

3438 ORLANDO RD.

PANAMA CITY, FLORIDA 32405

Mailing Address:

3438 ORLANDO RD.

PANAMA CITY, FLORIDA 32405

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

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

THOMAS MARTIN CARR

Name

3438 ORLANDO RD.

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

PANAMA CITY, FLORIDA 32405

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..

Thomas Martin Carr
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:

MGRM

THOMAS MARTIN CARR

3438 ORLANDO RD.

PANAMA CITY, FLORIDA 32405

(Use attachment if necessary)

ADD ARTICLE ARTICLE V- EFFECTIVE DATE

EFFECTIVE DATE FOR THIS COMPANY SHALL BE FEBRUARY 1, 2004.

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

REQUIRED SIGNATURE:

Thomas Martin Carr
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.)

THOMAS MARTIN CARR
Typed or printed name of signer

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)

RECEIVED
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