

W040000012542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

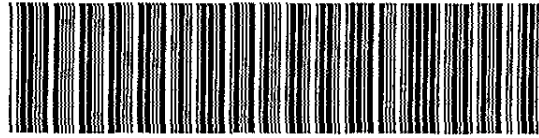
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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUNDERMAN DRYWALL II L.L.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:

DONALD SUNDERMAN
(Name of Person)

SUNDERMAN DRYWALL II L.L.C
(Firm/Company)

5129 Lee Drive
(Address)

Panama City, Florida 32404
(City/State and Zip Code)

For further information concerning this matter, please call:

Donald Sunderman at (850) 215-9069
(Name of Person) (Area Code & Daytime Telephone Number)

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:

SUNDERMAN DRYWALL II L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

5129 Lee Drive

5129 Lee Drive

Panama City, Florida 32404

Panama City, Florida 32404

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

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

Donald Sunderman

Name

5129 Lee Drive

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

Panama City

FLORIDA 32404

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

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STATE
TREASURY
TALLAHASSEE FLORIDA

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

Donald Sunderman

5129 Lee Drive

Panama City, Florida 32404

(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.)

Donald Sunderman

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)

I Donald Sunderman verify that I own 100 % of
SUNDERMAN DRYWALL II L.L.C.


Owner/MGR/Member

NOTARY STATE OF FLORIDA, COUNTY OF Brow
Sworn to and subscribed before me this 2nd day of February, 2004 by _____
Personally Known X OR Produced Identification _____
Type of Identification Produced _____
NOTARY SIGNATURE Mary Ann Sunderman My commission Expires June 26, 2005



Mary Ann Sunderman
MY COMMISSION # DD037389 EXPIRES
June 26, 2005
BONDED THRU TROY FAIR INSURANCE, INC.