## L04000012847

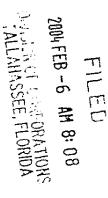
(Re	equestor's Name)		
(Ac	idress)	· · · · · · · · · · · · · · · · · · ·	
(Ac	ldress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nan	ne)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



000028007610

02/09/04--01010--004 \*\*125.00



## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Rick Wiggins Dry Wall 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:
Rick C Wiggins Person
RICK C Wiggins Drywall LLC To
209 LAKEVIEW Drive (Address)
Crestview Florida 32536 (City/State and Zip Code)
For further information concerning this matter, please call:
Rick Diggins at (850) 533-0984  (Name of Person) (Area Code & Davine 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

	The Contract of the Contract o
ARTICLE I - Name:	The state of the s
The name of the Limited Liability Company	
Rick Wiggins	DRY WALL SEE
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
209 LAKEVIEW DRIVE	209 LAKEDIELD Drive
Crestinero, Fl 32536	Crestniew Fl
	32536
ARTICLE III - Registered Agent, Register The name and the Florida street address of t	ered Office, & Registered Agent's Signature: he registered agent are:
- Rick C	Wiggins
209 Lakevi 6 Florida street address	(P.O. Box NOT acceptable)
Crestvice	FLORIDA 32536

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

Page 1 of 2 (CONTINUED)

•		
ARTICLE IV- Manager(s) or Manage	ging Member(s): or or Managing Member is as follows:	A Maria
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	100 - 100 -
MGR	Rick ( Wiggins Drive 209 LAKEDIEW Drive Drive	36 36
MGRM	Theresa A Brown 209 (AKEDIEW Drive Crestview FI 32536	
(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	79-S n authorized representative of a member.	रक, च्रिक
	i08.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury e true.)	

Filing Fees:

5100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)