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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone #)
		MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	
	Office Use Only	2/9



02/10/04--01073--009 **125.00

EFFECTIVE PATE



TRANSMITTAL LETTER

TO: **Registration Section Division of Corporations**

SUBJECT: <u>Palatka Paint Center Painting Service</u> , 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: EEFECTIVE D	AIE
Alex C. Grimes + 3-104 (Name of Person)	فت ، مو
Palatka Paint Center Painting Service	
P.O.BOX 2471	
(Address)	Ĵ
Palatka, FL 32/18	-

Palatka, FL 32178 (City/State and Zip Code)

For further information concerning this matter, please call:

<u>Alex C. Grimes</u> (Name of Person) at <u>386</u> <u>325-9297</u> (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

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	EFEECTIVE DATE
F	ORGANIZATION OR JABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is: <u>Palatka Paint Center Pa</u>	
ARTICLE II - Address:	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3425 Weaver Road	P.O. BOX 2471
Palatka, FL 32177	Palatka, FL 32178

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Alex C. Grimes Name

<u>3425 Weaver Road</u> Florida street address (P.O. Box <u>NOT</u> acceptable)

PalatKa, F City, State, and Zip FLORIDA 4

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 Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member

MAR

Grimes 32/18

Name and Address:

(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.)

. Grimes Typed or printed name of signee ρ

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)

ARTICLE V - EFFECTIVE DATE

THIS LLC, PALATKA PAINT CENTER PAINTING SERVICE, LLC. ELECTS TO HAVE THE EFFECTIVE DATE OF THIS BUSINESS TO BEGIN MARCH 1, 2004.

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