## 04000018608

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Oity/State/Zip/Pflone #)
PICK-UP WAIT MAIL
(Decines Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<b>{</b>

Office Use Only



000028746180

03/10/04--01035--025 \*\*125.00

## TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: R. A. GUNDERSON 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:

Robert A. Gunderson Jr.
(Name of Person)
R.A GUNDERSON PAINTING LLC
(Firm/Company)
2131 N. Meridian Rd. Apt 128
(Address)
Tallahassee Fl. 32303
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Gunderson at (850) 385-1156 or 591-1441

(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

OF THE STATES

A	RT	ICI	Æ.	T -	Na	me:
-	1-1	101	-1	a -	114	**7**

The name of the Limited Liability Company is:

RA GUNDERSON PAINTING LLC	<del>-</del>
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability C	'ompan'

Principal Office Address:	Mailing Address:
2131 N. Meridian Rd. #128	Robert Gunderson
Tallahassee Fl 32303	Z131 N. Meridian Rd.
	Tallahasset fl 32303

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

Robert A. Gunderson Jr.

Name

2131 N. Meridian R. #128

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

Tallahussee FLORIDA 32303
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,

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Manager of the name and address of each Manager of		
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Robert A. Gunderson Jr 7131 N. Meridian Rd. #128 Tallahassee Fl. 32303	
(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 a	uthorized representative of a member.	
(In accordance with section 608.	.408(3), Florida Statutes, the execution affirmation under the penalties of perjury	
	dereas Jr. inted name of signee	

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)