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DEPARTOR CORPORATIONS
IN INC. STATE

TALLIAHASSEE FLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: GLEATON 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:
George M. GLEATON (Name of Person)
GLEATON Painting.
1311 LATE Sunset Lu.
(City/State and Zip Code)
For further information concerning this matter, please call:
George M. Glaton at (850) 528-9363 (Name of Person) (Area Code & Daytime Telephone Number)
(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	;
Gleaton Paintin	15. LLC
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1311 Late Sunset TATIAHASSEE FLA 32304	TAIL Fla 32304
TAPLAHASSEE FLA 32704	TAIL FIA 32304
Florida street address (P.	
Having been named as registered agent and to liability company at the place designated in this registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as register that the control of the proper and complete per accept the obligations of my position as register.	accept service of process for the above stated limited is certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and

(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	Name and Address:
MGRM	George M. GLEATON 403 MCHE. HEN ST THIS PLA 32304
* *	
(Use attachment if necessary) NOTE: An additional article must be a	added if an effective date is requested.
REQUIRED SIGNATURE:	u Al D
Signature of a member o	r an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated herein	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury
3	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)