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(Requestor's Name)

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(City/State/Zip/Phone #)

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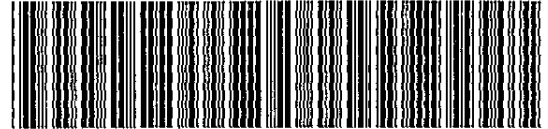
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN APR 15 2004

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**DATE:** April 2, 2004

**SUBJECT:** William E. Austin Carpentry 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:

Jodi K. Mustoe, Esquire  
Cox & Rouse, P.A.  
240 Lookout Place  
Maitland, Florida 32751

For further information concerning this matter, please call:

Jodi K. Mustoe, Esquire  
(407) 644-5225

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TALLAHASSEE, FLORIDA

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

**Filing Fees Included:**

\$100.00	Filing Fee for Articles of Organization
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy
\$ 5.00	Certificate of Status

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, being of legal age and competent to contract, for the purpose of organizing a limited liability company pursuant to the laws of the State of Florida, hereby adopt the following Articles of Organization, and hereby agree and certify as follows:

**ARTICLE I**

The name of the Limited Liability Company is:

William E. Austin Carpentry LLC

**ARTICLE II**

The principal place of business/ mailing address is:

1034 Foggy Brook Place  
Longwood, Florida 32750

The Managers may from time to time designate such other address and place of the principal office of this Limited Liability Company as it may see fit without amendment of these Articles of Organization.

**ARTICLE III**

The initial registered address of this Limited Liability Company and the initial registered agent of the Limited Liability Company shall be:

Jodi K. Mustoe, Esquire  
Cox & Rouse, P.A.  
240 Lookout Place  
Maitland, Florida 32751

The Limited Liability Company may change its registered agent or the location of its registered office, or both, from time to time without amendment of these Articles of Organization.

*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*

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am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

*[Handwritten Signature]*  
Registered Agent's Signature

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**ARTICLE IV**

The name and address of each Manager or Managing Member, all of whom will hold no less than ten percent (10%) ownership of this limited liability company, is as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGR	William E. Austin 1034 Foggy Brook Place Longwood, Florida 32750

**ARTICLE V**

This Limited Liability Company shall commence existence on April 3, 2004, and shall have perpetual existence unless sooner dissolved according to law.

**REQUIRED SIGNATURE:**

*[Handwritten 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.

William E. Austin  
Name of signee

Notary State of Florida, County of Orange

Sworn and subscribed before me this 1st day of April, 2004, by William E. Austin, who is

Personally Known  OR Produced Identification  Type of Identification

Produced : Florida DL. A235-925-60-448

NOTARY SIGNATURE *[Handwritten Signature]* My Commission Expires \_\_\_\_\_

