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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: C. J.A. Painting Company) (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:				
Charles Luke Inclema JR (Name of Person)				
C.J. A Printing CLC:				
6212 Butternt 02_ (Address)				
LKID FL 33813 (City/State and Zip Code)				
For further information concerning this matter, please call:				

Charles Inclema at (863) 644-9651

(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 OI, APR -9 PM 3: 21

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
C.J.A. Painting L	L.C.				
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
6212 Butternutt DR.	6212 Butternt Dr.				
466. F1. 33813	LKU, F1. 33813				

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:					
Charles Litudens	ered agent are: OLAPR -9 OLAPR -9				
Florida street address (P.O. Box	NUT DY				
Lk(d F(3) & 3 City, State, and Zij					

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

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MCR.	Charles L. Inclend IR 6213 Butternut Dr. LKIO FL 33813	<u>-</u>	
(Use attachment if necessary)		04 APR -9	SECRETAR
NOTE: An additional article must be added if an effective date is requested.			7 OF
REQUIRED SIGNATURE:			STAI
Signature of a member or an au	thorized representative of a member.	<u>2</u> 2	

(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.)

Chackes L Incleme
Typed or printed 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)