

# L04000038376

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

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TALLAHASSEE, FLORIDA

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## LIMITED LIABILITY COMPANY

articulate painting group, llc

Certificate of Status	0
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Page Count	03
Estimated Charge	\$155.00

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

**ARTICLE I - NAME:**

The name of the Limited Liability Company is:

**ARTICULATE PAINTING GROUP, LLC.**

**ARTICLE II - ADDRESS:**

The mailing address and street address of the principal address of the Limited Liability Company is:

**P.O. BOX 4251  
MIAMI LAKES, FLORIDA 33014**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:**

The name and the Florida street address of the registered agent is:

**RONALD W. HOUCHINS  
6101 W. ATLANTIC BOULEVARD  
SUITE 203  
MARGATE, FLORIDA 33063  
TELEPHONE: (954) 972-4157  
FACSIMILE: (954) 972-4143**

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**ARTICULATE PAINTING GROUP, LLC.**  
**Articles of Organization**  
Page Two

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, F.S.

 05/18/04  
 RONALD W. HOUCHINS  
 REGISTERED AGENT  
 DATE

 5/18/04  
 ADELKIS E. RODRIGUEZ  
 MANAGER  
 DATE

 5-18-2004  
 LUIS GARCIA  
 MANAGER  
 DATE

(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.)

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TALLAHASSEE, FL 32399