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# TRANSMITTAL LETTER

To:	To: Registration Section Division of Corporations			
Subject: Complete Drywall Service, 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:				
	Greg	ory L. Threat		
		ne of Person)		
	Complete D	rywall Service, LLC		
	· · · · · · · · · · · · · · · · · · ·	m/Company)		
539 Satsuma Road				
***************************************	(	Address)		
	Nicev	ille, FL 32578		
·	(City/Sta	te and Zip Code)		
For f	further information concerning this r	natter, please call:		
Greg	ory L. Threat at	404-569-6489		
	(Name of Person)	(Area Code & Daytime Phone 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		

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I

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The name of the Limited Liability Company is:

Complete Drywall Service, LLC

### Address:

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

Principal Office Address:

Mailing Address:

539 Satsuma Road Niceville, FL 32578 539 Satsuma Road Niceville, FL 32578

### ARTICLE III

### Registered Agent, Registered Office & Registered Agent's Signature

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

### Gregory L. Threat Name

539 Satsuma Road Florida street address (P.O. Box NOT acceptable)

> Niceville, FL 32578 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 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	Gregory L. Threat		
	539 Satsuma Road		
	Niceville, FL 32578		
NOTE: An additional article must be added if an effective date is requested.  REQUIRED SIGNATURE:			
REQUIRED SIGNATURE:	1		
1 Sugar	rex Apres		
Signature of a member or an a	uthorized 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.)		
	Gregory L. Threat		
Typed or pri	nted name of cionae		