## L04000040677

(Requestor's Name)  (Address)  (Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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W04-17894 656,676,2827

Office Use Only



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DIVISION OF CORPORATIONS

04 MAY 20 AM 10: 08

## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Collier 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:
Billy J. Collier (Name of Person)
Collier Painting LCC (Firm/Company)
P.O. Box 901 (Addréss)
$\frac{\text{Eusf: S. F(32727)}}{\text{(City/State and Zip Code)}}$
For further information concerning this matter, please call:
Bill Collier at 352 589 - 4008  (Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

TO:

Registration Section

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 SECRETARY OF STATIONS DIVISION OF CORPORATIONS



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 10, 2004

BILLY J. COLLIER P.O. BOX 901 EUSTIS, FL 32727

SUBJECT: COLLIER PAINTING, LLC

Ref. Number: W04000017894

We have received your document for COLLIER PAINTING, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

There is a balance due of \$25.00.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call 3 (850) 245-6890.

Jason Merrick Document Specialist

Letter Number: 504A00032226

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	er laintin	9 LCC
ARTICLE II - Ad The mailing addres	_	ncipal office of the Limited Liability Company is
Principal Office A	\ddress:	Mailing Address:
22516 CL	irle Rd.	P.O. Box 901
Eustis	, F1, 32726	Eughis, 41. 32727
	egistered Agent, Registered of Florida street address of the re	Office, & Registered Agent's Signature: egistered agent are:
		gistered agent are:

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

registered agent as provided for in Chapter 608, Florida Statutes..

SECRETARY OF STATE DIVISION OF CORPORATIONS

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Bill Collier 22516 Curle Rd, (P.O.Boy 96)
	Eastis, F1. 32726/32
:	
	7
(Use attachment if necessary)	
	ist be added if an effective date is requested.
REQUIRED SIGNATURE:	r an authorized representative of a member.
REQUIRED SIGNATURE:  Signature of a member of the section of the s	or an authorized representative of a member.  Son 608.408(3), Florida Statutes, the execution less an affirmation under the penalties of periory

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)