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Signatures

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Cleveland Painting Service LLP (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:
Cleveland Beckford (Name of Person)
Cleveland Painting Service L.P. P. (Firm/Company)
4249 SW 162 PL (Address)
Ocala, Fl 34473 (City/State and Zip Code)
For further information concerning this matter, please call:
Cleveland Beckford at (352) 208-6489 (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



May 27, 2004

CLEVELAND BECKFORD CLEVELAND PAINTING SERVICE L.L.P. 4249 SW 162 PL OCALA, FL 34473

SUBJECT: CLEVELAND PAINTING SERVICE L.L.P.

Ref. Number: W04000020758

We have received your document for CLEVELAND PAINTING SERVICE L.L.P. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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 (850) 245-6913.

Letter Number: 804A00037255

Diane Cushing Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Cleveland Painting Service L.L.B.	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limit	ed Liability Company is:
Principal Office Address: Mailing Addres	s:
4249 SW 162P1 4249 SW	162 PI
Ocala, Fl Orala, Fl	
34473 34473	
ARTICLE III - Registered Agent, Registered Office, & Registered Ag The name and the Florida street address of the registered agent are: Cleveland Beckford Name 4249 Sw 162 Pl Florida street address (P.O. Box NOT acceptable) Ocala FLORIDA 34473 City, State, and Zip	Signature: Signature: Signature: SECRETARY OF STATE SECULAHASSEE, FLORIDA

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

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

Devon Smith

2248 SW 146 Loop

Orala, F1 34473

MGRM

Desmond Campbell

MGRM
Desmond Campbell
907 West Anderson Lane
Citrus Springs, F1 34434

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED 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.)

Cleveland Beckford
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)