

L04000042632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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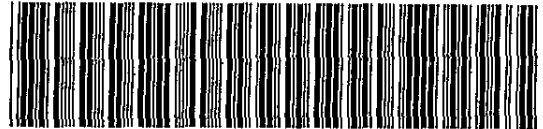
(Business Entity Name)

(Document Number)

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HL
06/08/04

5p

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MATT PIERSON TRIMWORK 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:

MATTHEW PIERSON
(Name of Person)

W04-20922

MATT PIERSON TRIMWORK LLC
(Firm/Company)

4223 CRICKET HOLLOW COVE
(Address)

CASSELBERRY, FL 32707
(City/State and Zip Code)

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For further information concerning this matter, please call:

MATT PIERSON at (407) 695-6924
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 26, 2004

MATTHEW PIERSON
4223 CRICKET HOLLOW COVE
CASSELBERRY, FL 32707

SUBJECT: DONALD BLOOM CUTTING EDGE TRIM WORKS LLC
Ref. Number: W04000020322

We have received your document for DONALD BLOOM CUTTING EDGE TRIM WORKS LLC and your check(s) totaling \$130.00. 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.

Please also note: your cover letter refers to a different name than is shown on your document. Please be sure that the name in Article I appears exactly as you would like it to be filed.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 504A00036738

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~Matthew Pierson Timwork LLC~~ Matt Pierson Timwork LLC

ARTICLE II - Address:

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

Principal Office Address:

4223 CRICKET HOLLOW COVE

CASSELBERRY, FL 32707

Mailing Address:

4223 CRICKET HOLLOW COVE

CASSELBERRY, FL 32707

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

Matthew Pierson
Name

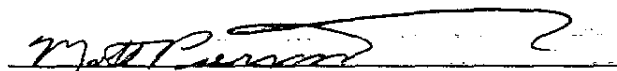
4223 cricket Hollow Cove
Florida street address (P.O. Box **NOT** acceptable)

Casselberry FLORIDA 32707
City, State, and Zip

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DIVISION OF CORPORATIONS

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:

MGRM

MATTHEW PIERSON

4223 CRICKET HOLLOW COVE

CASSELBERRY, FL 32707

MGRM

DANA PIERSON

4223 CRICKET HOLLOW COVE

CASSELBERRY, FL 32707

(Use attachment if necessary)

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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.)

MATTHEW PIERSON

Typed or printed name of signer

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)