

L04 0000 47928

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

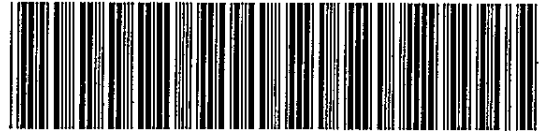
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TALLAHASSEE, FLORIDA

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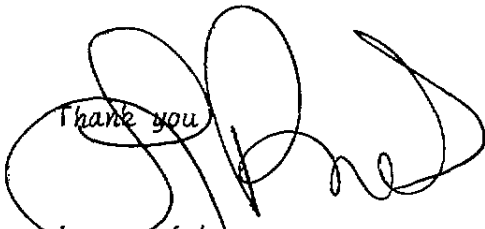
June 14, 2004

Registration Section  
Division of Corporations  
409 E Gaines Street  
Tallahassee, FL 32399

Please find enclosed documents needed to set an LLC and a check  
in the amount of \$160.00 to pay for the fees for LLC.

If you have any questions please call at:

Michael Lee Pettross  
9008 Eaton Ave.  
Jacksonville, FL 32216  
904-722-9118

  
Thank you  
Laura Niebsame  
registered agent

ALL FLORIDA TITLE SERVICES, INC.  
4417 BEACH BLVD. SUITE 105  
JACKSONVILLE, FL 32207  
PH. (904) 399-2121 FAX (904) 399-2636

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Florida Waterproofing and Paint Restoration, 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:

Laura M. Riebsame  
(Name of Person)

All Florida Title Services, Inc  
(Firm/Company)

4417 Beach Blvd Ste 105  
(Address)

Jacksonville, FL 32207  
(City/State and Zip Code)

For further information concerning this matter, please call:

Laura Riebsame at 904 399-2121  
(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

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Florida Waterproofing and Paint Resoration, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

9008 Eaton Ave.

Jacksonville, FL 32211

**Mailing Address:**

9008 Eaton Ave.

Jacksonville, FL 32211

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

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

All Florida Title Services, Inc.

Name

4417 Beach Blvd., Ste 105

Florida street address (P.O. Box **NOT** acceptable)

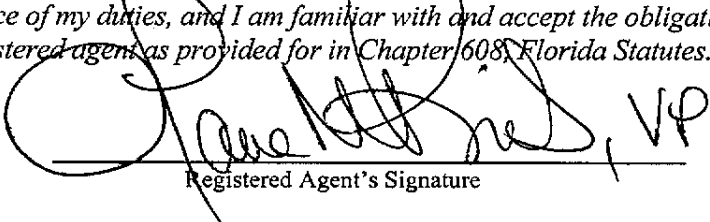
Jacksonville

FLORIDA

32207

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

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TALLAHASSEE  
FLORIDA  
SECRETARY OF STATE

**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:**

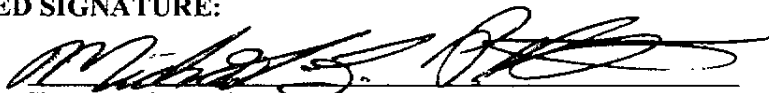
MGRM

Michael Lee Pettross  
9008 Eaton Ave  
Jacksonville, FL 32211

(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.)

Michael Lee Pettross

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)

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TALLAHASSEE, FLORIDA

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