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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN 28 PM 2:05

EFFECTIVE DATE
6/28/04

TRANSMITTAL LETTER

ATX1

TO: Registration Section
Division of Corporations

SUBJECT: BENJAMIN LEE 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:

BENJAMIN O. LEE
(Name of Person)

BENJAMIN LEE PAINTING LLC
(Firm/Company)

P O BOX 1493
(Address)

CRESTVIEW, FL 32536
(City/State and Zip Code)

For further information concerning this matter, please call:

BENJAMIN O. LEE at 850-803-0631
(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

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BENJAMIN LEE PAINTING LLC

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

ATX1

ARTICLE I - Name:

The name of the Limited Liability Company is:

BENJAMIN LEE PAINTING LLC

ARTICLE II - Address:

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

Principal Office Address:

BENJAMIN LEE PAINTING LLC

P O BOX 1493

CRESTVIEW, FL 32536

Mailing Address:

BENJAMIN LEE PAINTING LLC

P O BOX 1493

CRESTVIEW, FL 32536

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

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

BENJAMIN O. LEE

Name

931 W. JAMES LEE BLVD. # 5

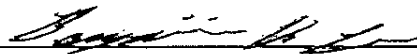
Florida street address (P.O. Box **NOT** acceptable)

CRESTVIEW

FLORIDA 32536

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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6/28/04

BENJAMIN LEE PAINTING LLC

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

ATX1

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

BENJAMIN O. LEE

931 W. JAMES LEE BLVD. # 5

CRESTVIEW, FL 32536

(Use attachment if necessary)

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

ARTICLE V: EFFECTIVE DATE: JUNE 28, 2004

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.)

BENJAMIN O. LEE

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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