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JUL 15 P 2:16

PAID  
TOLSON'S OFFICE

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

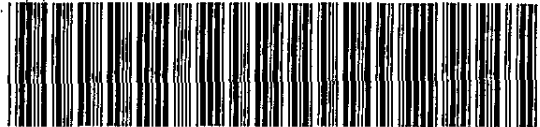
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Special Instructions to Filing Officer:

W04-23868

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Office Use Only



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07/13/04 01048-008 \*\*75.00



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

FILED

JUN 15 P 2 16  
TALLAHASSEE, FL

June 21, 2004

PATRICIA A. GUNTER  
36 SOUTH HWY 17-92  
SUITE 103  
DEBARY, FL 32713

SUBJECT: A & G SCREEN ENCLOSURES, LLC  
Ref. Number: W04000023868

We have received your document for A & G SCREEN ENCLOSURES, LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

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).

There is a balance due of \$25.00.

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) 245-6094.

Agnes Lunt  
Document Specialist

Letter Number: 404A00041071

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** A a Screen Enclosures, LLC  
(Name of Limited Liability Company)

**FILED**

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ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patricia A. Gunter  
(Name of Person)

36 South Hwy 17-92 Suite 103  
(Firm/Company)

(Address)

DeBary, Florida 32713  
(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia A. Gunter at (386) 668-0093  
(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**

**FILED**

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CLERK OF DISTRICT COURT  
FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

A o G Screen Enclosures, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

36 South Highway 17-92

Suite 103

DeBary, FL 32713

**Mailing Address:**

Same

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

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

Patricia A. Gunter  
Name

36 South Hwy 17-92, Suite 103  
Florida street address (P.O. Box NOT acceptable)

DeBary FLORIDA 32713  
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..*

Patricia A. Gunter  
Registered Agent's Signature

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

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

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**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Patricia A. Gunter  
36 South Hwy 17-92, Suite 103  
DeBary, Florida 32717

MGRM

Jeffery K. Andrews  
36 South Hwy 17-92, Suite 103  
DeBary, Florida 32713

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Patricia A. Gunter

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.)

Patricia A. Gunter

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)