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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dubinoss Lines, Italia)
(Document Number)
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DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		OLANDS ON I. OS ON OS ON I. OS
SUBJECT: Images on Glass LLC (Name of Lin	mited Liability Company)	- Alay S
The enclosed Articles of Organization and fee(s) a	are submitted for filing.	TO THE OS
Please return all correspo	ondence concerning this matter to the following:	NO AS
Janet Johnson		
	(Name of Person)	
Images on Glass		
	(Firm/Company)	
20840 Pine Tree Lane		
	(Address)	
Estero, FL 33928		
((City/State and Zip Code)	
For further information concerning this matter, ple	ease call:	
Janet Johnson	at (239) 340-1465	
(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

]	ORGANIZATION FOR LIABILITY COMPANY **ATTOMULE STATEMENT
ARTICLE I - Name The name of the Limi	ted Liability Company is	
Images on Glass, LL	_	ORIGONS
ARTICLE II - Addr The mailing address a		principal office of the Limited Liability Company is:
Principal Office Add	lress:	Mailing Address:
20840 Pine Tree Lane		same
Estero, FL 33928		
The name and the Flo	orida street address of the	ed Office, & Registered Agent's Signature: registered agent are:
J	anet Johnson Name	ρ.
_		•
<u>2</u> 1	0840 Pine Tree Lane Florida street address (P.	O. Box NOT acceptable)
-	stero	FLORIDA 33928

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..

Page 1 of 2 (CONTINUED)

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

• 1 1	
ARTICLE IV- Manager(s) or Man The name and address of each Mana	naging Member(s): ger or Managing Member is as follows: Name and Address:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Janet Johnson
	20840 Pine Tree Lane Estero, FL 33928
MGRM	Greg Bennefield
	6192 Principia Drive
	Fort Myers, FL 33919
	<u> </u>
	<u> </u>
	<u> </u>
(I Ica 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.)

Janet Johnson/Greg Bennefield

Typed or printed name of signee

\$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)