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1194-20014 ABRYAN MAY 24 2004

J. BRWAN JUL 2 2 2004

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		TON TON ON STATE OF THE PARTY O
SUBJECT: CARPENTRY GUY, LLC		TO THE REAL PROPERTY.
(Nam	e of Limited Liability Company)	
The enclosed Articles of Organization and	fee(s) are submitted for filing.	S. K. S. J. S.
Please return all c	orrespondence concerning this matter to the following:	70
WILLIAM GUY		
	(Name of Person)	
	(Firm/Company)	
34910 BAXTER AVE		
	(Address)	
DADE CITY, FL 3352	3	
	(City/State and Zip Code)	
For further information concerning this ma	atter, please call:	
LORI GELINAS	at (813) 996-1661	
(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 24, 2004

WILLIAM GUY CARPENTRY GUY, LLC 34910 BAXTER AVE DADE CITY, FL 33523

SUBJECT: CARPENTRY GUY, LLC

Ref. Number: W04000020014

We have received your document for CARPENTRY GUY, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6043.

Letter Number: 504A00036255

Joey Bryan Document Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AN ALAMASKE, E.	1/1/1/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2
·	ONLOW S

ARTICLE I - Name:

The name of the Limited Liability Company is:

CARPENTRY GUY, LLC

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
34910 BAXTER AVE	SAME
DADE CITY, FL 33523	

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

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

Name

Name

State Dayley Ave

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

Oade City FLORIDA 3352)
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

Page 1 of 2 (CONTINUED)

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 PRESIDENT / MGRM WILIAM GUY 34910 BAXTER AVE DADE CITY, FL 33523				
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	Man Stranger		
PRESIDENT / MGRM	WILIAM GUY 34910 BAXTER AVE DADE CITY, FL 33523	- Chillens		
(Use attachment if necessary)				
NOTE: An additional article must be	added if an effective date is request	ted.		
REQUIRED SIGNATURE:				
Signature of a member or an a	uthorized representative of a member.			
(In accordance with section 608, of this document constitutes an a that the facts stated herein are the	.408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)			
Cillian G Typed or pri	integrame 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)