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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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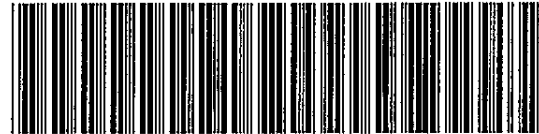
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04 SEP 13 PM 2:05
SECURITY DIVISION
TALLAHASSEE, FLORIDA

04 SEP 13 PM 1:56
SECURITY DIVISION
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Richard's Repairs, 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:

Richard T. Fletcher
(Name of Person)

Richard's Repairs
(Firm/Company)

8454 Manor Dr.
(Address)

Tallahassee, Fl. 32303
(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Fletcher at (850) 562-4399
(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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06 SEP 13 PM 2 05
TALLAHASSEE, FL
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Richard's Repairs LLC

ARTICLE II - Address:

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

Principal Office Address:

8454 Manor Dr
Tallahassee, Fl.
32303

Mailing Address:

8454 Manor Dr
Tallahassee, Fl.
32303

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

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

Richard T. Fletcher
Name
8454 Manor Dr.
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32303
City, State, and Zip

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TALLAHASSEE, FL 32303
SECRETARY OF STATE

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, F.S.

Richard T. Fletcher
Registered Agent's Signature

(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

MGRM

Name and Address:

Richard T. Fletcher
8454 Manor Dr.
Tallahassee, FL 32303

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Richard T. Fletcher

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.)

Richard T. Fletcher

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, FL
SECRETARY OF STATE