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04 OCT 20 AN ID 19 SECRETARY OF STATE ALLAHASSEE FLORDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: <u>Kenneth Wright Pai</u> (Name of Limite	nting Contractors LLC d Liability Company)
The enclosed Articles of Organization and fee(s) are sub Please return all correspondence concerning this matter	-
Henneth Wright (Name offerson)	
Benneth Wright Painting Con (Firm/Company)	tractors LLC
8724 Minnew Creek Dr (Address)	ive
Tallahassee Fc 3, (City/State and Zip Code)	2312
For further information concerning this matter, please ca	11:
Name of Ferson)	t (<u>850</u>) <u>545-9187</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Ce	55.00 Filing Fee & certified Copy diditional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations 409 E. Gaines Street	Division of Corporations P.O. Box 6327

Tallahassee, Florida 32399

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Kenneth Wright Painting Co.	ntractors LLC
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8724 Minnow Creek Drive Tallahassee FC 32312	8724 Minnow Creek Drive Tallahassee Ec 32312
ARTICLE III - Registered Agent, Registered Office,	& Registered Agent's Signature:
The name and the Florida street address of the registered Menneth Wright	O4 OCT 2C SECRETARY TALLAHASSI
8724 Minnaw Creek Florida street address (P.O. Box NO Tallahassee FL City, State, and Zip	OT acceptable)

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.

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing	; Member	Name and Address:	
MGRM		Kenneth Wright 8724 Minnow Creek Drive Tallahassee Fu 32312	· · · · · · · · · · · · · · · · · · ·
			, -
(Use attachment if nec	essary)		

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.)

h Wright
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)