

L04 0000 78607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

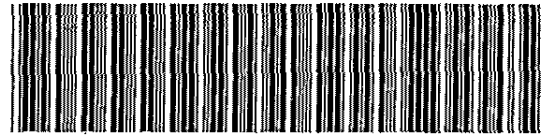
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TALLAHASSEE, FLORIDA

04 OCT 27 AM 11:13

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporation

SUBJECT: Gary Kemp Drywall 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:

Gary L. Kemp
(Name of Person)

GARY KEMP DRYWALL LLC
(Firm/Company)

76 Echen Drive
(Address)

Santa Rosa Beach, FL 32459
(City/State and Zip Code)

For further information concerning this matter, please call:

Gary L. Kemp
(Name of Person)

at 850-685-4416
(Area Code & Daytime Telephone Number)

SECRET
TALLAHASSEE, FLORIDA

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STREET ADDRESS:

Registration section
Division of Corporation
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I- Name:

The name of the Limited Liability Company is:

Gary Kemp Drywall LLC

ARTICLE II- Address:

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

Principal Office Address:

76 Eden Dr.
Santa Rosa Beach
FL 32459

Mailing Address:

P.O. Box 6406
Miramar Beach,
FL 32550

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

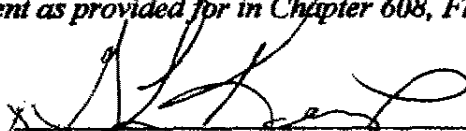
The name and the Florida street address of the registered agent are:

Gary Kemp
Name

76 Eden Drive
Florida street address (P.O. Box **NOT** acceptable)

Santa Rosa Beach, FL 32459
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 positions as registered agent as provided for in Chapter 608, Florida Statutes...


Registered Agent's Signature

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04 OCT 27 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Name and Address:

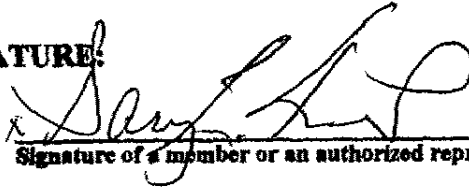
"MGR"

Cathy L. Kemp
76 Eden Dr.
Santa Rosa Beach,
FL 38459

(Use 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 of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Cathy L. Kemp
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

04 OCT 27 AM 11:14

FILED

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)