

L04000088024

Division of Corporations

https://efile.sunbiz.org/scripts/efilcovr.exe

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000240356 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

RECEIVED
04 DEC -6 PM 1:06
DIVISION OF CORPORATION

2009 DEC -6 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

LIMITED LIABILITY COMPANY
UPSHUR GREEN STORM SHUTTERS, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	02 3
Estimated Charge	\$155.00

Name Availability	
Document Examiner	DCC
Notar	DCC
Register	DCC
Statement	DCC
Transfer	DCC

Electronic Filing Menu

Corporate Filing

Public Access Help

**ARTICLES OF ORGANIZATION
OF
UPSHUR GREEN STORM SHUTTERS, L.L.C.**

ARTICLE I

NAME: The name of the Limited Liability Company is:

UPSHUR GREEN STORM SHUTTERS, L.L.C.

ARTICLE II

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

1009 Malcolm Court
Oviedo, Florida 32765

ARTICLE III

REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE: The name and the Florida street address of the registered agent are:

TOM W. FOSHEE
1009 Malcolm Court
Oviedo, Florida 32765

SECRET
FALL 11 2004
2004 DEC 1
511

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 in Chapter 608, F.S.


TOM W. FOSHEE

ARTICLE IV

MANAGER(S) OR MANAGING MEMBER(S): The name and address of each Manager or Managing Member is as follows:

TOM W. FOSHEE, MGRM.
1009 Malcolm Court
Oviedo, Florida 32765

CATHY M. FOSHEE, MGRM.
1009 Malcolm Court
Oviedo, Florida 32765



TOM W. FOSHEE, MGRM.

(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.)

TOM W. FOSHEE, MGRM.
Printed Name of Signee

FILED
2004 FEB 6 P 12:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA