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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

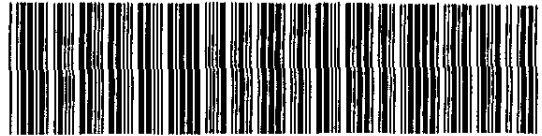
(Business Entity Name)

(Document Number)

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2004 DEC 13 AM 1:37  
REGISTRATION  
TALLAHASSEE, FLORIDA

J. BRYAN DEC 16 2004

**TRANSMITTAL LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Thomas Hutchens Painting & Texturing 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:

Thomas S. Hutchens  
(Name of Person)

Thomas Hutchens Painting & Texturing LLC  
(Firm/Company)

3235 HERRING Rd. Lot #17  
(Address)

Jacksonville, FL 32216  
(City/State and Zip Code)

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CORPORATIONS  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JANINE A. DRENDEL at (904) 879-6060  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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2008 DEC 15 AM 1:37  
ORGANIZATIONS  
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Thomas Hutchens Painting & Texturing 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:

3235 HERRING Rd Lot 17  
JACKSONVILLE, FL 32216

3235 HERRING Rd Lot 17  
JACKSONVILLE, FL 32216

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

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

OPENDER'S INCOME TAX SERVICE  
Name

540223 US1  
Florida street address (P.O. Box NOT acceptable)

Callahan FL 32011  
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, F.S..*

Jamie A. Oender  
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

**Name and Address:**

MGR

Thomas S. Hutchens  
3235 Herring Rd. Lot #17  
Jacksonville, FL 32216

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SUN. CORPORATIONS  
GALLAHUSSEE, FLORIDA

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Thomas S Hutchens  
Signature of a member or an authorized representative of a member.

(In accordance with section 508.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

THOMAS S. Hutchens  
Typed or printed name of signer

**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)