

L05000001420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

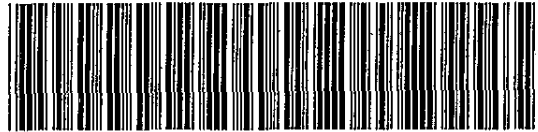
(Business Entity Name)

(Document Number)

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10/01/04--01022--013 \*\*100.00

01/06/05--01004--002 \*\*25.00

FILLED  
2005 JAN -5 PM 4:30  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

W04-36594  
J. BRYAN OCT 5 2004

J. BRYAN JAN -6 2005

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KEVIN PAQUIN LLC  
(Name of Limited Liability Company)

2005 JAN -5 PM 4:30  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
FILED

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEVIN PAQUIN  
(Name of Person)

KEVIN PAQUIN LLC  
(Firm/Company)

2090 BAYSHORE BLVD, #108  
(Address)

DUNEDIN FL 34698  
(City/State and Zip Code)

For further information concerning this matter, please call:

LANNIE GREGORY CPA at (727) 785-3545  
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

October 5, 2004

KEVIN PAQUIN  
KEVIN PAQUIN LLC  
2090 BAYSHORE BLVD., #108  
DUNEDIN, FL 34698

SUBJECT: KEVIN PAQUIN LLC  
Ref. Number: W04000036594

We have received your document for KEVIN PAQUIN LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 604A00057693

FILED  
2005 JAN - 5 PM 4:30  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

FILED  
2005 JAN -5 PM 4:30  
OFFICE OF CORPORATIONS  
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

KEVIN PAQUIN LLC

ARTICLE II - Address:

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

Principal Office Address:

2090 BAYSHORE BLVD #108  
DUNEDIN FL 34698

Mailing Address:

2090 BAYSHORE BLVD #108  
DUNEDIN FL 34698

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

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

KEVIN PAQUIN

Name

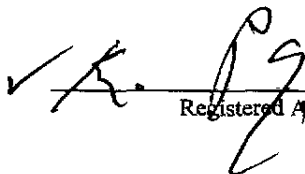
2090 BAYSHORE BLVD #108

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

DUNEDIN FLORIDA 34698

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, Florida Statutes..*



Registered Agent's Signature

**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

KEVIN PAQUIN  
2090 BAYSHORE BLVD #108  
DUNEDIN, FL 34698

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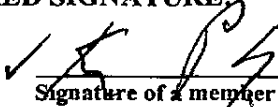
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(Use attachment if necessary)

FILED  
2005 JAN -5 PM 4:30  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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.)

KEVIN PAQUIN

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)