

Division of Corporations

Página 1 de 1

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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : 120010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

DIVISION OF CORPORATION

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RECEIVED

LIMITED LIABILITY COMPANY

F&M Foam Decor LC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

F&M FOAM DECOR LC

ARTICLE II ADDRESS

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

PO BOX 242
NOKOMIS, FL 34275

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

A1A REGISTERED AGENT INC.
92 SADBERRY RD.
QUINCY, FL 32351

Having been named as registered agent 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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TALLAHASSEE, FLORIDA

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Paul Smith V.P.

A1A REGISTERED AGENT INC. / Registered Agent's Signature

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PAGE 2 F&M FOAM DECOR LC

ARTICLE IV MANAGEMENT

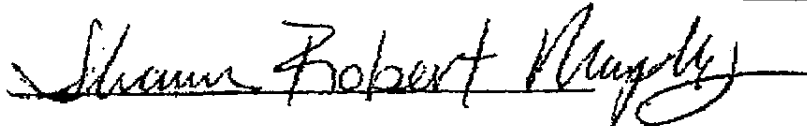
The Limited Liability Company will be managed by one or more managing members and is, therefore, a Member Managed Company.

ARTICLE V

The name(s) and address(es) of the managing members of the LLC are:

Managing Member: SHAWN ROBERT MURPHY ; 1517 PAMELA ST
NOKOMIS, FLORIDA 34275

Managing Member: SCOTT ANDREW FOGO ; 350 AURORA RD VENICE,
FLORIDA 34293



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.)

SHAWN ROBERT MURPHY
Typed or printed name of signee

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TALLAHASSEE FLORIDA

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