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SECRETARY OF STATE

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 4, 2005

NEIL ANDERSON ANDERSON PAINTING 4965 MAGNOLIA AVE MULBERRY, FL 33860

SUBJECT: ANDERSON PAINTING Ref. Number: W05000011230

We have received your document for ANDERSON PAINTING and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 205A00015093

Diane Cushing Document Specialist

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations							
SUBJECT: JNGER 50 / DO / Name of Limited Liability Com	n ting						
The enclosed Articles of Organization and fee(s) are submitted for fili	ng.						
Please return all correspondence concerning t	this matter to the following:						
Weil Anderson							
(Name of Person)	•						
Anderson Pain	ntina						
(Firm/Company)							
4965 Magnalia Ave.							
(Address)							
Mulberry Florida 33860							
(City/State and Zip Co	de)						
For further information concerning this matter, please call:							
Meta Index 50N at (863) (Name of Person) at (863)	428-2053 de & Daytime Telephone Number)						
	2005 NAR 15 SECRETARY ALLAHASSE						
STREET ADDRESS:	MAILING ADDRESS:						
Registration Section Division of Corporations	MAILING ADDRESS:						
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida 32314						

ARTICLES, OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	ny is:
Anderson Pai	nting L.L.C.
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4965 Magnalia AV	e. Neil Anderson
Mulberry Florida	4965 Magnolia Alle
33860	Mulberry Florida 3386
The name and the Florida street address o	stered Office, & Registered Agent's Signature: f the registered agent are: Name
Florida street addre	ess (P.O. Box NOT acceptable) ASS ASS ASS ASS ASS ASS ASS A
	State, and Zip The To
ompany at the place designated in this certificate, ree to act in this capacity. I further agree to comp nd complete performance of my duties, and I am f	ept service of process for the above stated limited liability. I hereby accept the appointment as registered agent and oly with the provisions of all statutes relating to the proper amiliar with and accept the obligations of my position as for in Chapter 608, Florida Statutes

Page 1 of 2 (CONTINUED)

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: Name and Address: "MGR" = Manager "MGRM" = Managing Member (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 this document constitutes an affirmation under the penalties of perjury

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

that the facts stated herein are true.)

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee