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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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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Texas (Name of	Painting Limited Liability Company)	LLC	
The enclosed Articles of Organization and fee(s) at Please return all correspondence concerning this re	are submitted for filing.		
DAJE Ho (Name of Person)			-
Texas Pair (Firm/Company)	uting.		
2628 Sop Chop	ppy Hwy		OS APP
Sopchoppy FIA 3 (City/State and Zip Code	2358		APR - I AM IO: 07
For further information concerning this matter, ple	ease call:		0: 07 Loklov
(Name of Person)	at () (Area Code & Daytim	e Telephone Number)	
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		

Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Texas Pain	ting LLC
ARTICLE II - Address: The mailing address and street address of the princip	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2628 Sopchoppy Hay Sopchoppy, FIA 32358	2628 Sopchopoil HU Sopchoppy FIA, 32358
Florida street address (P.O. Box	HOUSTON HOUSTON NOT acceptable) TO SAPR AND ACCEPTABLE
Sopchoppy fifth fl. City, State, and Z City, State, and Z Having been named as registered agent and to acceptiability company at the place designated in this cert registered agent and agree to act in this capacity. I statutes relating to the proper and complete perform accept the obligations of my position as registered agent.	ot service of process for the above stated limited ificate, I hereby accept the appointment as further agree to comply with the provisions of all ance of my duties, and I am familiar with and

(CONTINUED)

Registered Agent's Signature

ARTICLE	IV- Manager(s) or Managing .	Member(s):
AILICE	x v = ivianagui (SI VI MIAHAKIUK .	141011111061191

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing M	Name and Address: ember	
MGRM	DATE HOUSTON DE DE SUPCHUPPY HUY SUPCHUPPY, HA 3235F	
		-
(Use attachment if neces,	TALCHE AF	
NOTE: An additional a	RE:	100
Signa	gre of a member or an authorized representative of a member.	
of this	ordance with section 608.408(3), Florida Statutes, the execution document constitutes an affirmation under the penalties of perjury acts stated herein are true.)	
	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)