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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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04/27/05--01018--015 **130.00

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Paradise Point, 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:		
Clay Cupeper (Name of Person)		
Paradise Point, LLC (Firm/Company)		
1292 Timberlane Rd. (Address)		
Tallahassee, FL 32312 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Mark Fletcher at (850) 893 - 8418 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee \$		
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

ARTICLE I - Name: The name of the Limited Liability Company is:			
Paradise Paint, 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:		
1292 Timberlane Rd. Tallahassee, FL 32312	← Same		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:			
The name and the Florida street address of the registered agent are:			
Mark Fletch Name	rec		
1292 Timbertane Rd.			
Florida street address (P.O. Box NOT acceptable)			
<u> </u>	<u>FL 32317</u>		
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			
Mad Phle Registered Agent's	Signature Signature		
(CONTINU Page 1 of 2	JED)		
rage 1 or 2			

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		
MGR	Mark Fletcher	
* · · · · · · · · · · · · · · · · · · ·	218 East Franklin St.	
	Quincy, FL 32351	
MGR_	Clay Culpepper	
	3327 Nettingham Dr.	
	Tallahassee, FL 32312	
MGRM	Travis Bryant	
	175 Shelleracker Ln	
	Caro, GA 39827	
MGRM	Frank Mercer	
	3658 Dwight Davis Dr.	
MGRM	Tallahassee, FL 32312	
	Brad Jackson	
(Use attachment if necessary)	1131 Gordon Ave Thomasville, GA 31792	
NOTE: An additional article must be added if an effective date is requested.		
REQUIRED SIGNATURE:		
A. Clar Pulpepper		
Signature of a member or an authorized representative of a member.		

R. Clay (... pepper Typed or printed name of signee

that the facts stated herein are true.)

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury