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| /Cit | y/State/Zip/Phone | <u> </u> |
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| PICK-UP | MAIT | MAIL |
| (Ви | siness Entity Nam | ne) |
| (Do | cument Number) | |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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- Table 1

Office Use Only



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Cooke Carpentry

35 Llewellyn Trail Palm Coast, FL 32164 386-206-9781, cell 386-566-5010

PINSTER IN 18 PM 1:21

May 12, 2005

In regards to: Articles of Organization for LLC Fee Registration Section, Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Earlier today I inadvertently sent in my Articles of Organization for Florida Limited Liability Company and Transmittal Letter without my check for \$160.00 to cover the filing fee, certificate of status, and certified copy.

I apologize for my mistake and hope that this copy and enclosed check are sufficient to go ahead with the registration of my LLC. If there is anything else that you need, please feel free to contact either myself at the above numbers or Abbey DiPersio at 386-566-5019.

Thank you for your time and consideration in this matter and I look forward to staring my new business.

Sincerely,

Eric Cooke

Owner

Cooke Carpentry

Enclosures (2)

ADD

TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Cooke Corpentry, 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: |
| Eric Cooke or Abbey Dawn DiPersio |
| |
| 2 2 |
| (Firm/Company) |
| 36 Liewellyn Trail |
| Palm Coast, FL 30164 |
| |
| For further information concerning this matter, please call: |
| Abbey Dawn Difersio at (386) 506-5019 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| S \$125.00 Filing Fee S S \$130.00 Filing Fee S Certificate of Status Certified Copy (additional copy is enclosed) S \$125.00 Filing Fee S S \$160.00 Filing Fee, Certificate of Status S Certified Copy (additional copy is enclosed) |
| 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: | · · · · · · · · · · · · · · · · · · · |
| Cooke Carpent | ry, LLC |
| ARTICLE II - Address: The mailing address and street address of the pri | incipal office of the Limited Liability Company i |
| Principal Office Address: | Mailing Address: |
| 35 Llewellyn Trail Palm Coast, FL 32164 | Same |
| | |
| ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re Abbey Dawn Dr Name | |
| | ress (P.O. Box NOT acceptable) |
| Palm Coast City, State, as | FL 32164 ad Zip |
| liability company at the place designated in th | accept service of process for the above stated limite his certificate, I hereby accept the appointment as . I further agree to comply with the provisions of a |

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..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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| Coast, Fl 32164 |
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| red representative of a member. |
| Florida Statutes, the execution ion under the penalties of perjury |
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