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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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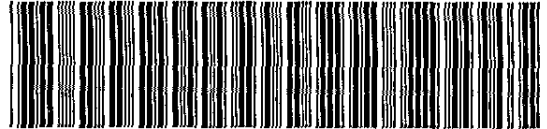
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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C. West

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GULFCOAST DRYWALL, 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:

JASON D. SELIGMAN
(Name of Person)

(Firm/Company)

257 INDIANO BAY CIRCLE
(Address)

MT. PLEASANT, SC 29464
(City/State and Zip Code)

For further information concerning this matter, please call:

JASON SELIGMAN
(Name of Person)

at (843) 200-1427 (Area Code & Daytime Telephone Number)

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TALLAHASSEE
FLORIDA

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Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
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

May 25, 2005

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

RE: Articles of Organization
- Gulfcoast Drywall, LLC

To Whom It May Concern:

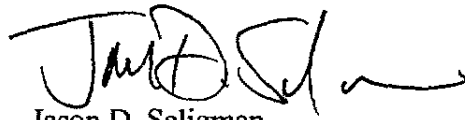
Please find the enclosed Articles of Organization for Gulfcoast Drywall, LLC
the enclosed check for one-hundred and thirty dollars (\$130.00).

Should you have any questions, please feel free to contact me at:

Jason D. Seligman
257 Indigo Bay Circle
Mt. Pleasant, SC 29464
843.200.1427

Thank you for your attention and care.

Truly yours, I am



Jason D. Seligman
Gulfcoast Drywall

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GULFCOAST DRYWALL, 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:

JASON SELIGMAN
257 INDIGO BAY CIRCLE
MT PLEASANT, SC 29464

→ SAME

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

JASON SELIGMAN
Name
10011 PARKER LAKE CIRCLE
Florida street address (P.O. Box **NOT** acceptable)
NAVARRE FL 32566
City, State, and Zip

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.

Jason Seligman
Registered Agent's Signature

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Name and Address:

JASON SELIGMAN
257 INDIGO BAY CIRCLE
MT. PLEASANT, SC 29464

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Jason Seligman

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.)

JASON D. SELIGMAN

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA

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