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2005 JUN -9 12:18  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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**TRANSMITTAL LETTER**

**FILED**

**TO:** Registration Section  
Division of Corporations

2005 JUN -9 P 2:18

**SUBJECT:** Javier's Framing, Decking & Drywall LLC  
(Name of Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sarah DeSantiago

(Name of Person)

Javier's Framing, Decking & Drywall LLC

(Firm/Company)

1813 Clarcona-Ocoee Road

(Address)

Ocoee, FL 34761

(City/State and Zip Code)

For further information concerning this matter, please call:

Sarah Desantiago

(Name of Person)

at ( 407 ) 654-2371

(Area Code & Daytime Telephone Number)

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

JAVIER'S FRAMING, DECKING & DRYWALL LLC  
1613 CLARCONA-OCOEE RD.  
OCOEE, FLORIDA 34761  
(407)654-5886

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

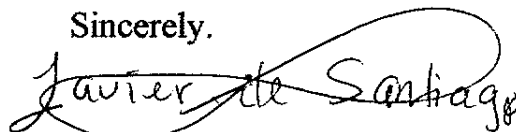
June 6, 2005

**Cover Sheet**

Re: Articles of Incorporation

Please find the enclosed paper work and check attached to file the articles of Incorporation. Please contact Sarah DeSantiago @ 407-654-2371, if any additional information is needed.

Sincerely.

A handwritten signature in cursive script that reads "Javier DeSantiago". The signature is written in dark ink and is positioned above the printed name and address.

Javier DeSantiago  
Javier's Framing, Decking & Drywall LLC  
1613 Clarcona-Ocoee Rd.  
Ocoee, Florida 34761  
(407)654-5886 office  
(407)654-2371 fax

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY -9 P 2: 1:

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Javier's Framing, Decking & 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:**

1613 Clarcona-Ocoee Road  
Ocoee, FL 34761

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

Javier DeSantiago

Name

1613 Clarcona-Ocoee Road

Florida street address (P.O. Box NOT acceptable)

Ocoee, FL 34761

FL

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.*

  
Registered Agent's Signature

(CONTINUED)

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

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Sarah DeSantiago

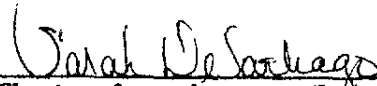
1613 Clarcona-Ocoee Road

Ocoee, FL 34761

(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 that the facts stated herein are true.)

Sarah DeSantiago

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)