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L05 0000062926

2005 JUN 17 P 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

(Business Entity Name)

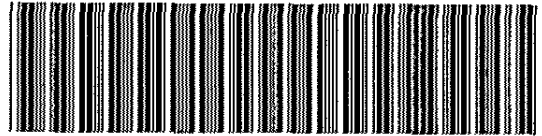
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

FILED

SUBJECT: Test The Best Painting Co., LLC 2005 JUN 17 P 2:50
(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:

Tomorroio Clark
(Name of Person)

Test The Best Painting Co. LLC
(Firm/Company)

1330 Kettles Ave.
(Address)

Lakeland, FL 33805
(City/State and Zip Code)

For further information concerning this matter, please call:

Tomorroio Clark at (813) 688-9179
(Name of Person) (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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Best Painting Co., 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:

1330 Kettles Ave.
Lakeland, FL 33803

1330 Kettles Ave.
Lakeland, FL 33803

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

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

Star Tribble
Name

810 W. 14th St.
Florida street address (P.O. Box **NOT** acceptable)

Lakeland FL 33803
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..

Star Tribble
Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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

Name and Address:

MGRM

Ernest Harrington Jr.

512 W. 6th St.

Lakeland, FL 33805

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MGR

Tomorreo D Clark

1830 Kellies Ave

Lakeland, FL 33805

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGRM

Warren Owner

716 W. Carver St

Lakeland, FL 33805

MGRM

Star Middle

810 W. 4th St.

Lakeland, FL 33805

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Tomorreo Clark

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.)

Tomorreo CLARK

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)