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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

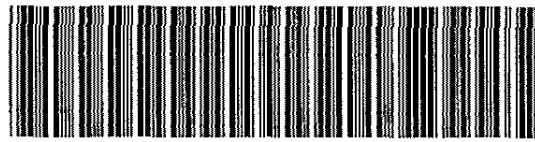
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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05 AUG 29 PM 3:01

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GARAGE DOOR'S & OPENERS INSTALL & REPAIR
(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:

JAMES ANDERSON
(Name of Person)

GARAGE DOOR'S & OPENERS INSTALL & REPAIR
(Firm/Company)

800 Ridge Ave
(Address)

Wildwood FL 34785
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES ANDERSON at (352) 504-6393
(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

SECTION 1000 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:

GARAGE DOOR'S & OPENER'S INSTALL & REPAIR LTD.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

800 Ridge Ave
Wildwood
FL. 34785

Mailing Address:

800 Ridge Ave
WILDWOOD
FL. 34785

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

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

JAMES ANDERSON
Name

800 Ridge Ave
Florida street address (P.O. Box NOT acceptable)

Wildwood FL 34785
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..

James Anderson
Registered Agent's Signature

(CONTINUED)

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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

Manager

Name and Address:

JAMES ANDERSON
800 Ridge Ave
Wildwood FL 34785

managing Member

Jane netta Anderson
800 Ridge Ave
Wildwood FL 34785

Managing member

Theof's James
7330 C.R. 213
Wildwood, FL 34785

Managing member

Stanley E. Anderson
7237 C.R. 213
Wildwood FL 34785

(Use attachment if necessary)

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

REQUIRED SIGNATURE:


James Anderson
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.)

James Anderson
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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