

LOS000099759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

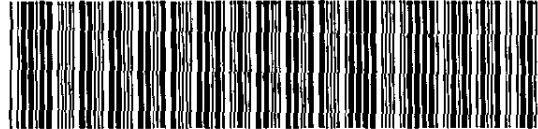
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/11/05--01010--001 **25.00

09/30/05--01040--001 **100.00

05 OCT 19 AM 9:05
SYSTEMS

W05-45526

B. McKnight OCT 11 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DANIEL AND PRISCILLA PAINTING SERVICES, LLC
(Name of Company)

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

Please return all correspondence concerning this matter to the following:

JONATHAN E. HAUSBURG, ESQUIRE
3202 N. TAMiami TRAIL
SARASOTA, FL 34234

For further information concerning this matter, please call:

JONATHAN E. HAUSBURG, ESQUIRE at **(941) 351-9111**
(Name of Person) (Area Code & Daytime Telephone Number)

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 3, 2005

JONATHAN E HAUSBURG ESQ
3202 N TAMIAMI TRAIL
SARASOTA, FL 34234

SUBJECT: DANIEL AND PRISCILLA PAINTING SERVICES, LLC
Ref. Number: W05000045526

We have received your document for DANIEL AND PRISCILLA PAINTING SERVICES, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight
Document Specialist
New Filings Section

Letter Number: 205A00059952

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
DANIEL AND PRISCILLA PAINTING SERVICES, LLC

ARTICLE II - Address:

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

Principal Office Address:

4540 Mulgrave Avenue
North Port, FL 34287

Mailing Address:

4540 Mulgrave Avenue
North Port, FL 34287

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

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

PRISCILLA WOOTON

Name

4540 Mulgrave Avenue

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

North Port, FL 34287

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.

Priscilla Wooton

Registered Agent's Signature

(CONTINUED)

05 OCT 10 AM 9:06
FLORIDA STATE
DEPARTMENT OF
REVENUE

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:

MGR

**SHERMAN WOOTON
4540 Mulgrave Avenue
North Port, FL 34287**

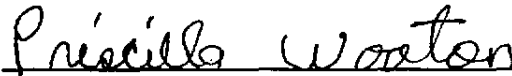
MGR

**PRISCILLA WOOTEN
4540 Mulgrave Avenue
North Port, FL 34287**

(Use attachment if necessary)

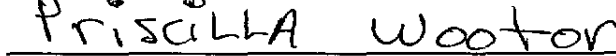
NOTE: An additional article must be added if an effective date is requested.

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.)



Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)