## L05000105916

(Re	equestor	's Name)		
(Ac	ldress)	<del></del>		
(Ac	ldress)			
(City/State/Zip/Phone #)				
PICK-UP		WAIT	MAIL	
(Bu	ısiness l	Entity Nan	ne)	
(Do	cument	Number)		
Certified Copies	_ c	ertificates	of Status	
Special Instructions to	Filing O	fficer:		
ocumen <b>t</b> xaminer	Offic	e Use Onl	у	
loria er				
in aler verifilat	•			
Ackno ledgement	սսն			
W. P. Verityer	טטע			



400060971214

10/31/05--01024--001 \*\*130.00



TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Se Division of Co					
SUBJECT: JAMES WEUZEL DRYWALL, L.L.C. (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:					
Citty WENZEL (Name of Person)					
JAMES WENZEL DRYWALL, L.L.C.					
530 S. 2ND St. (Address)					
PENSACOLA, FL 32507 (City/State and Zip Code)					
For further information concerning this matter, please call:					
(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)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address Registration Section	Street/Courier Addres Registration Section	Z005 SECR		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

005 OCT 31 P 1: 46

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "Limited Company,"	Company" or their libbreviation "LLC," or "L.C.,")				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:					
Principal Office Address:	Mailing Address:				
530 S. 2ND St. Pensacola, Fl. 32507	530 S. 2NOSt. Zensacoia, Fl. 32507				
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)					
The name and the Florida street address of the registered agent are:  ONDY WENZEL  Name					
Florida street address (P.O. Box NOT acceptable)					
PENSALO E City, State, and	<u>1 5050/</u> Zip				
Having been named as registered agent and to accelliability company at the place designated in this registered agent and agree to act in this capacity. statutes relating to the proper and complete perfoaccept the obligations of my position as register	s certificate, I hereby accept the appointment as I further agree to comply with the provisions of <u>all</u> ormance of my duties, and I am familiar with and				
Registered Agent's Signature	(REQUIRED) #:				

(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 TAMES D. Wenzel 530. S. RNO St. Pens ACOLA. Pl. 32507 (Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>Old, 26, 2065</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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 perlity that the facts stated herein are true.)

CINTAL WENZE

Typed or printed name of signee

U

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)