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COVER LETTER

TO: Registration Of Division of	n Section Corporations	•
SUBJECT:	Dawson Painting o	Contracting Services, LLC d Liability Company)
	(Name of Limite	d Liability Company)
The enclosed Articl	es of Organization and fee(s) are s	ubmitted for filing.
Please return all cor	respondence concerning this matte	er to the following:
	Leonard	Rame of Person)
		(Contracting Services, LLC
	<u> </u>	× 7/55 (Address)
		FL 33872 /State and Zip Code)
<u> </u>	(City	/State and Zip Code)
For further informat	ion concerning this matter, please	call:
Leonard	R. Dawson	at (<u>\$63</u> <u>735 - 2299</u> (Area Code & Daytime Telephone Number)
(1)	fame of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a chec	k for the following amount:	
☐ \$125.00 Filing F	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)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Dawson Painting & Con (Must end with the words "Limited Liability Company, "Limited	Fracting Services, LLC Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5189 Hammock Road Zolfo Springs, FL 33890	P.O. Box 7155 Sebring, FL 33872
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	oistered agent are:
<u>Leonard K</u> Name	OF CO
5189 Hamma	ock Road 3 3
Florida street addr	ess (P.O. Box NOT acceptable)
ZoHo Springs City, State, an	FL 33890 55 \$\frac{1}{25}\$
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	Alfred R. Dawson	
	5189 Hammock Rd. Zolfo Springs, FL 33890	
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date	te of filing: 11/9/05 (OPTIONAL) pecific and cannot be more than five business days pri	
(If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	pecific and cannot bé more than five business days pri	or
	_	
<u>REQUIRED</u> SIGNATURE:		
Lu		
Signature of a member of	r an authorized representative of a member.	:
(In accordance with section of this document constitute that the facts stated here	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)	SECRE

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)