

106000017301

(Requestor's Name)		
Mr. & Mrs. Normand La Rocque 2503 River Bend Dr. Ruskin, FL 33570)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
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SECRETARY OF STATE

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February 7, 2006

NORMAND LA ROCQUE 2503 RIVER BEND DR. RUSKIN, FL 33570

SUBJECT: N.D.G. FRAMING L.L.C.

Ref. Number: W0600000908

We have received your document for N.D.G. FRAMING L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and being returned for the following correction(s):

The registered agent must sign accepting the designation.

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return 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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 706A00008871



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2006

NORMAND LA ROCQUE 2503 RIVER BEND DR. RUSKIN, FL 33570

SUBJECT: N.D.G. FRAMING L.L.C.

Ref. Number: W06000000908

We have received your document for N.D.G. FRAMING L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 506A00001381

COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: N.D. G. Framing 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:
Debra La Rocque (Name of Person)
N.D.G. Framing h.L.C.
2503 River Bend Or Address)
Ruskin, Fl. 33570 (City/State and Zip Code)
For further information concerning this matter, please call:
Debra La Rocque at (813) 649-9746 on 624-4498 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certificate of Status \$\bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

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 Co	ompany" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal control of the pri	ipal office of the Limited Liability Company is:
Principal Office Address:	failing Address:
2503 River Bend Dr Ruskin FL 33520	2503 River Bent OF T
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the regis	stered agent are:
Debra ha Roc Name	que
<u>2503 River B</u> Florida street address	end Dr. (P.O. Box NOT acceptable)
Ruskin F	L 33.520 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. I statutes relating to the proper and complete performaccept the obligations of my position as registered.	certificate, I hereby accept the appointment as further agree to comply with the provisions of all rmance of my duties, and I am familiar with and
Registered Agent's Signature	(REGURED)

(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	Name and Address:	
"MGRM" = Managing Member	Normand Wa Rocque	
iMGR"	Ruskin FL 33570 Debra ha Rocque 2503 River Bond Dr	
"MGR"	Kuskin Fla 33520 Czlenn Waugh 2503 River Bedd Dr	
<u> </u>	Kuskin PL. 33570	
(Use attachment if necessary)	ARY OF STU	
ARTICLE V: Effective date, if other than the date of filing: (PTIONAL) (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 perjury that the facts stated beggin are true.)

that the facts stated herein are true.)

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)