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## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Decker Professional Services LLC (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:				
Daniel L. Decker				
(Name of Person)				
Please return all correspondence concerning this matter to the following:  Daniel L. Decker (Name of Person)  Decker Professional Services LC (Firm/Company)  3952 Cattail Pond Dr. (Address)				
3952 Cattail Pand Dr.				
Jacksonville, Fl 32224 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Gloria C. Decker at 904 992-8289 (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 & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Address Street/Courier Address Registration Section 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

ARTICLES OF ORGANIZATION FOR FI	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	TILED RED
Decker Professional Se (Must end with the words "Limited Liability Company, "Limited	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3952 Cattail Pond Dr. Jacksonville, Fl. 32224	Same
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: tered Agent. You must designate an individual or another
The name and the Florida street address of the range of t	Decker EFFECTIVE DATE  03/10/06
3952 Catto Florida street add Jackson ville City, State, a	lress (P.O. Box NOT acceptable)  FL 3224

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Man The name and address of each Mana	naging Member(s): ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Daniel L. Decker 7 3952 Cattail Pand Dry Jacksonville, F13222470
MGRM	Gloria C. Decker 73 73 73 73 73 73 73 73 73 73 73 73 73
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)	e date of filing: 3-10-06. (OPTIONAL) se specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a member	C. Oachar er or an authorized representative of a member.

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)

(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.)