

L06000047203

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000126865 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0393

From: Account Name : HUBCO
Account Number : 104652003400
Phone : (516) 935-3940
Fax Number : (316) 935-3088

FILED
06 MAY -5 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

06 MAY -5 PM 2:40

DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

MAIKE PAINTING LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **MAIKE PAINTING LLC**

ARTICLE II - Address

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

Principal Office Address:Mailing Address:2181 Elkton Court2181 Elkton CourtFort Myers, FL 33907Fort Myers, FL 33907

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

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

Yosmaike RamosName2181 Elkton Court(P.O. Box or Mail Drop Box NOT Acceptable)Fort Myers, FL 33907(City / State / Zip)

FILED
06 MAY -5 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Yosmaike Ramos

Registered Agent's Signature - Yosmaike Ramos

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:MGRYosmaike Ramos- 2181 Elkton Court, Fort Myers, FL 33907

(Use attachment if necessary)

REQUIRED SIGNATURE:Yosmaike Ramos

Signature of a member or 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.)

Yosmaike Ramos

Typed or printed name of signee

FILED
06 MAY -5 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA