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TO: Registration Section	
Division of Corporations	2006 APR 20 -
SUBJECT: Toucan Duet Repairs, L	2006 APR 28 P 3: 06
Division of Corporations SUBJECT: Toucan Duet Repairs, L. (Name of Limited Liability Company)	LLAHASSEE, FLORIDA
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Josue G. Rajas (Name of Person)	· · ·
(Name of Person)	
Toucan Duet-Repairs (Firm/Company)	
(Firm/Company)	
2731 Cedaridge Circle	. 4
(Address)	
Clomant, FL 34711	-
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Josue G. Rojas at 305, 724-8	
(Name of Person) (Area Code & Daytime Tele	phone Number)
Enclosed is a check for the following amount:	
Certificate of Status 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:

TALLAHASSEE, FLORIDA

TOUCAN DUCH Repairs, LLC.

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

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:
Express Home Repairs, U.C.
Name
2731 Cedaridge Circle.
Florida street address (P.O. Box NOT acceptable)
Clermont 34711

City, State, and Zip

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

Title:		Name and Address:		FILE
"MGR" = Manager "MGRM" = Manag			200h	APA 28 F
MGR"	-	Josue G. 2732 Cedarid Clermont,	Rojas SECRI Ge Circleit Cc - 3471	ETARY OF TASSEE, F
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)