L060000055060

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(enj.como.z.p./ Hone //)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



400074815974

OLO-OL-OLA

05/22/06--01055--020 **125.00

06 HAY 22 AM 10: 1

SECRETARY OF STATE BIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HG Leach Painting 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:
Humberto G. Leach Jr. (Name of Person)
H. Ca. Leach Painting LC
2415 9 Lincoln Ave
(Address)
Lakeland 41 33563 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Mill Leach at (803) 808-6323 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \text{\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}
Mailing Address Street/Courier Address Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 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:	EFFECTIVE DATE 00-01-001
H.G. Leach Paint (Must end with the words "Limited Liability Company, "Limited Con	mpany" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the princip	pal office of the Limited Liability Company is:
W. I. I. C. C. W	- ME

rincipal Office Address:	Maning Address:
2415 9 Lincoln Ave Lakeland fl 33803	H. Cy Leach Painting LLC 0415 S Lincoln Ave Lakeland fl 33805

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:

Miel Amelia-Shyrigh Leach
Name

3915 S Lincoln Aul

Florida street address (P.O. Box NOT acceptable)

Lakeland FL 33803

City State, and Zin

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 (RAQUIRED)

(CONTINUED)
Page 1 of 2

SECRETARY OF SIALLS
BIVISION OF CORPORATIONS

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 "MGRM" = Managing Member	Name and Address:
Managec	Humberto Cr. Leach 5r 2415 & Lincoln Ave Lakeland fi 33803
Charles Britain Carlos (aprillate in the charge of the cha	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: June 13006. (OPTIONAL) (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 herein are true.)

to Jeach
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certifled Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Page 2 of 2