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05/26/06--01007--013 **130.00

06 MAY 26 PM 3: 28 SECRETARY OF STATE TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: COUNTRYMENS (Name of Limited	SARAGE DOOR Service LL d Liability Company)
The enclosed Articles of Organization and fee(s) are su	ubmitted for filing.
Please return all correspondence concerning this matte	r to the following:
JOHN	Rame of Person)
COUNTRYMENS GARA	GE DOOR SERVICE LLC
713 N 14th St. +	# 175 (Address)
Lees BURG (City)	FL. 34748 State and Zip Code)
For further information concerning this matter, please	call:
JOHN BALL (Name of Person)	at (352) 303-5446 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee \$\frac{\frac{1}{2}}{2}\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

COUNTRYMENS GARAGE DOOR SERVICE 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:

713 N. 14th St. #175

713 N, 14 54, #175 Leesburg F1

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

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

JOHN BALL

Florida street address (P.O. Roy NOT accentable)

Leesburg FL 34748

FILED

06 MAY 26 PM 3: 28

SECKE LARY OF STATE
TAIL AHASSEE, 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..

egistered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Name and Address:			
JOHN BALL 713 N 14th St. #175 Lecsbury, Fl. 3474	<u> </u>		
WILLIAM F. LOCK 3370 CR 507 WILDWOOD F1, 34	E 185		
added if an effective date is requested	I_		
r an authorized representative of a member. n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)	SECRETARY OF STATE	06 MAY 26 PM 3: 28	FILED
	John Ball 713 N 14 m St. #175 Leashury, Fl. 3474 William F. Lock 3370 CR 507 Wildowood Fl. 347 william an effective date is requested Ran authorized representative of a member. 1608.408(3), Florida Statutes, the execution are an affirmation under the penalties of perjury	To HW BALL 713 N 14 St. #175 Lecsburg, Fl. 34748 William F. Locke 3370 CR 507 WILDWOOD Fl. 34785 an authorized representative of a member. 1608.408(3), Florida Statutes, the execution are an affirmation under the penalties of perjury	JOHN BALL 713 N 14 St. #175 Lechury, Fl. 34748 William F. Locke 3370 CR 507 WILDWOOD Fl. 34785 added if an effective date is requested. RECRETARY 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)