LD60000H377

(Re	equestor's Name)	,
(Ac	ldress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	Gopo
PL UC		

Office Use Only



000076420100



06/21/06--01030--006 **160.00

SECRETALY OF STATE

6 JUN 21 PM 3:



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Premier Powder Coating of Daytona, Home of Cody's (Name of Limited Liability Company) Customs, LLC
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
bandra Coyne (Name of Person)
Fremier Powder coating of Dayton, Abone of Cady's Customs
1103 Landers St. (Address)
Ormand Beach, FL 32/74 (City/State and Zip Code)
For further information concerning this matter, please call:
Sanda Counc at 386 233 - 3957 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\subseteq} \$
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: Power and Double constinut of Day	y tong, Home of Cody's Customs,	
(Must end with the words "Limited Liability Company, "Limited		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:	
525 Carswell Ave., Unit P Holly Hill, FL 32117	1103 Landers St. Ormand Beach, FL 32174	
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 re	gistered agent are:	
Craig Scott Cou	ine, sr.	
1103 Landers St. Florida street address (P.O. Box NOT acceptable)		
Ormand Beach City, State, as	FL 32174 ad Zip	
liability company at the place designated in the registered agent and agree to act in this capacity.	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and	

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

O6 JUN 21 PM 3: 2

APPROVED

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

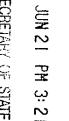
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Craig Scott Coune, Sr. 1103 Landers St. Drmond Beach, FL 32174
MGRM	Sandra Lynn Coyne 1103 Landers St. Ormond Beach, Fr 32174
	
(Use attachment if necessary)	
	e date of filing: $6-19-06$. (OPTIONAL) the specific and cannot be more than five business days prior
REQUIRED SIGNATURE: Signature of a member	er of an authorized representative of a member.
(In accordance with see of this document const that the facts stated h	ction 608.408(3), Florida Statutes, the execution citutes an affirmation under the penalties of perjury herein are true.)

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)



Typed or printed name of signee