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TALLAHASSEE, FLORIDA

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## **COVER LETTER**

то:	Registration Section Division of Corporations
SUBJE	CCT: Principal Contractors Group LLC. (Name of Limited Liability Company)
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Bernard J. DePaul Jr. (Name of Person)
	Principal Contractors Group, LLC.
	110 Chasteen Street
	Punta Gorda, FL 33950 (City/State and Zip Code)
	(City/State and Zip Code)
For fur	ther information concerning this matter, please call:
Ber	(Name of Person)  (Name of Person)  (Area Code & Daytime Telephone Number)
Enclos	ed is a check for the following amount:
\$125	.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$ Certified Copy (additional copy is enclosed) \$\bigcup \\$ Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Principal Contractors Group, LLC. (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
Principal Contractors Group LLC Same  110 Chasteen Street  Punta Gorda, FL 33950  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:
Bernard J. DePaul Jr. Name
Florida street address (P.O. Box NOT acceptable)
Punta Gorda FL 33950 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

liability company at the place designated in this certificate, I hereby accept the appointment as egistered 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 O6 JUN 23 PH 3: 5:

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGK (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (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:

(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.)

gnature of a member or an authorized representative of a member.

Bernard J. De Paul Jr.
Typed or printed name of signee

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)

SECRETARY OF STATE