

FROM : LAZARUS
Division of Corporations

FAX NO. : 3052201440

Jul. 14 2006 10:50AM P1
Page 1 of 1

L06000070353

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000180323 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)220-1440

2006 JUL 14 AM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RECEIVED

06 JUL 14 AM 11:52

DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

MASCINA PAINTING LLC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

L06-70353
7/14/2006

H06000180323

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY.**

ARTICLE I

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

MASCINA PAINTING LLC.

ARTICLE II

**THE MAILING ADDRESS AND STREET ADDRESS OF THE
PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:**

**14818 S.W. 108 TERR
MIAMI, FL 33196.**

ARTICLE III

**THE NAME AND THE FLORIDA STREET ADDRESS OF THE
REGISTERED AGENT ARE:**

CLAUDIO MASCINA

NAME

14818 S.W. 108 TERR

FLORIDA STREET ADDRESS, P.O. BOX NOT ACCEPTABLE

MIAMI, FL 33196

CITY, STATE AND ZIP.

2006 JUL 14 AM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H06000180323

H06000180323

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 THE 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 REGISTERED AGENT'S SIGNATURE

CLAUDIO MASCINA

2006 JUL 14 AM 8:39
SECRETARY OF
LAHASSEE

FILED

ARTICLE IV.

THE LIMITED LIABILITY COMPANY IS TO BE MANAGED BY ONE MANAGER OR MORE MANAGERS AND IS THEREFORE, A MANAGER - MANAGED COMPANY.

CLAUDIO MASCINA
ANA S. MASCINA

SIGNATURE OF MEMBER OR AN AUTHORIZED REPRESENTATIVE OF A MEMBER.

(IN ACORDANCE 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.)

CLAUDIO MASCINA

ANA S. MASCINA

TYPED OF PRINTED NAME OF SIGNED.

H06000180323