L06010082794

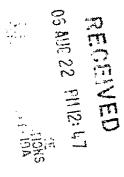
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
5/

Office Use Only



200078613942

08/22/06--01052--009 **130.00



PILED 06 AUG 22 PH 3: QA SECRETARY OF STATE SELECTION OF STATE

SECRETARY OF STATE TALLAHASSEE, FLORIDA

06 AUG 22 PM 3: 07

EITED

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: OSCAR Jimenez Framing 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:
Ron Benfield
(Name of Person)
002
(Firm/Company)
58 Sioux Circle
(Address)
Harana A 32333
(City/State and Zip Code)
SSR 2
For further information concerning this matter, please call:
Ron Benfield at 850, 539-517/50 8
(Name of Person) (Area Code & Daytime Telephone Number)
77
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \Bigcup \\$155.00 Filing Fee & \Bigcup \\$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

ADTICE ECOFODO ANE	TATION FOR ELODIDA E MATTER E LA DIE PERCONDANIA
AKTICLES OF ORGANI	ZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	The second secon
The name of the Limited L	iability Company is:
	menez Framing LLC Top is
(Must end with the words "Limited	Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and st	reet address of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1514 Tired Ci Cairo, CA 396	neek Blvd 1514 Tired Creek Blvd Cairo, OA 39828
(The Limited Liability Company can business entity with an active Flori	d Agent, Registered Office, & Registered Agent's Signature: mot serve as its own Registered Agent. You must designate an individual or another da registration.) treet address of the registered agent are:
	Name
	58 Sidny Circle
ì	Florida street address (P.O. Box NOT acceptable)
	Havana FL 33,333
	City, State, and Zip
liability company at the registered agent and agree	istered agent and to accept service of process for the above stated limited place designated in this certificate, I hereby accept the appointment as to act in this capacity. I further agree to comply with the provisions of all
	oper and complete performance of my duties, and I am familiar with and for my position as registered agent as provided for in Chapter 608, F.S
eccopt are conganions	Ra BUD
Re	egistered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Mana "MGRM" = Ma	ger naging Member	Name and Address:
MGRM MGRM	<u> </u>	Cuanhtemor, Rodriguez 1514 Tired Creek Blod Cairo, GA 39828
MGRM	• • • • • • • • • • • • • • • • • • •	Dibnicio Vasquez 1514 Tired Creek Blud Cairo, GA 39888
		
fective date is li:	date, if other than the casted, the date must be	date of filing: (OPTIONAL specific and cannot be more than five business days
LE V: Effective	date, if other than the casted, the date must be	
LE V: Effective fective date is lis	date, if other than the casted, the date must be ate of filing.)	
LE V: Effective fective date is lis days after the d	date, if other than the cated, the date must be ate of filing.) GNATURE:	specific and cannot be more than five business days
LE V: Effective fective date is lis days after the d	date, if other than the cated, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with sect of this document constit	specific and cannot be more than five business days or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury
LE V: Effective fective date is lis days after the d	date, if other than the ested, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with sect of this document constit that the facts stated he	specific and cannot be more than five business days or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury