L06000100184

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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SECRETARY OF STATE
TALL AND SECRETARY OF STATE

wow-43584 mfi



October 4, 2006

WILLIAM A SPANKS JR. 45 PRINCEWOOD LANE PALM BEACH GARDENS, FL 33410

SUBJECT: SUPERIOR COATINGS OF SOUTH FLORIDA LLC

Ref. Number: W06000043584

We have received your document for SUPERIOR COATINGS OF SOUTH FLORIDA LLC. However, the document has not been filed and is being returned for the following:

The attached form must be completed in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6065.

Letter Number: 306A00058810

MARIA L FENDER OFFICE CLERK

COVER LETTER

TO:		ration Se on of Co	ection rporations							
SUBJE	:CT: _	Supi	EKIOR	COATING (Name of Li	2	oF	SOUTH	FLO	CI DA	A, LLC
				(Name of Li	mited	Liabil	lity Compa	any)		
The end	closed A	rticles of	f Organizat	ion and fee(s)	ere su	bmitte	d for filing	ζ,		
Please 1	return al	l corresp	ondence co	oncerning this r	natter	to the	following	ij.		
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					(N	ame of	(Person)			
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		45	PRINC	E WOOD) (LAN	JE			
•				EWOOD		(Add	ress)			
	PA	LM.	BEACH	GARDEN	S	F		33410	S	
-	-				(City/S	State ar	nd Zip Code	:)	-	
For furt	ther info	rmation	concerning	this matter, ple	ease c	all:				
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		(Name	of Person)	<i></i>	`	at ((Area Cod	e & Dayt	ime Te	lephone Number)
Enclos	ed is a o	check fo	or the follo	wing amount	:					
]\$125	.00 Filî	ng Fee		0.00 Filing Fed ate of Status	e &	Certi	155.00 Fi ified Copy tional copy	у		S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			Registra Division P.O. Bo	Address tion Section of Corporation x 6327 ssee, FL 32314			Street/Co Registrati Division Clifton B 2661 Exe Tallahass	on Section of Corporation of Corpora	on oratior Center	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SUPERIOR COATING OF SOUTH FLORIDA, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

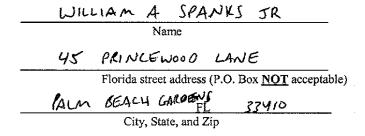
ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:				
901 South Military Trail	45 Princewood Line				
West P.Im Beach, FL, 33415	Palm Bench Gardens, FC 33410				

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:



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..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

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:	
MGRM	WILLIAM A SPANKS JR 45 Princewood line Polm Beach Gordes, FC 33410	
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		• :
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(Use attachment if necessary) ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must b to or 90 days after the date of filing.)	e date of filing:/0/5/06 (OPTIONAL) se specific and cannot be more than five business days prior	بي
REQUIRED SIGNATURE:		. =

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

(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.)

WHLIAM A SPANKS JK

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)