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SECRETARY OF STATE
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Deco-	Bond Floor & Deck	Coatings, LLC	
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Giovanni	N. Orcino		, who there
		Name of Person)	
	(Firm/Company)	7 2
3628 74t	h Street North	,	2006 OCT SECRET
		(Address)	
St. Peter	sburg, FL 3371	0	RY SSE
		/State and Zip Code)	OF S
For further information	concerning this matter, please	call:	OF STATE B. FLORIDA
Giovanni N. O	rcino of Person)	at (727) 343-22	22
() vimive	or raisou;	(Isted Code & Day anne Is	siephone i validor,
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & 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 Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Deco-Bond Floor & Deck Coatings, LLC (Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3628 74th Street North St. Petersburg, FL 33710	3628_74th Street North St. Petersburg, FL 33710
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regista business entity with an active Florida registration.) The name and the Florida street address of the re	Office, & Registered Agent's Signatures ared Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Giovanni N. Orcino	D
Name	
3628 74th Street North	
Florida street add	ress (P.O. Box NOT acceptable)
St. Petersburg City, State, a	FL 33710 nd Zip
	accept service of process for the above stated limited

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:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Men	mber
MGRM	Giovanni N. Orcino
	3628 74th Street North
	St. Petersburg, FL 33710
ffective date is listed, the da	er than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days p
CLE V: Effective date, if oth	er than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days p
CLE V: Effective date, if oth fective date is listed, the date is listed, the date is listed.	ry) er than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days p g.)
CLE V: Effective date, if oth ffective date is listed, the date days after the date of filing REQUIRED SIGNATUR Signature	er than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days p g.) E: The specific and cannot be more than five business days p g.) A GRA of a member or an authorized representative of a member. ance with section 608.408(3), Florida Statutes, the execution
CLE V: Effective date, if oth ffective date is listed, the date days after the date of filing REQUIRED SIGNATUR Signature (In accordate of this doc	er than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days p g.) E: AGRA of a member or an authorized representative of a member. ance with section 608.408(3), Florida Statutes, the execution ument constitutes an affirmation under the penalties of perjury facts stated berein are true.)
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