

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALKHASSEE FLORIDA

COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT: PRO FINISH SOLUTIONS 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: ALL AN OHEGNEL

ALLAN QUESNEL	
(Name of Person)	
PRO FINISH SOLUTIONS LLC	
(Firm/Company)	
1755 NORTH 6TH STREET	
(Address)	

ORLANDO, FLORIDA 32820

(City/State and Zip Code)

For further information concerning this matter, please call:

ALLAN QUESNEL

(Name of Person)

Enclosed is a check for 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 Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ANTICLES OF ONGANIZATION FOR FLORIDA LIVITED LIABIL	ITT COMPA	MAI
ARTICLE I - Name:		
The name of the Limited Liability Company is:		
PRO FINISH SOLUTIONS 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 Lia	ability Compar	ny is:
Production Address Add		
Principal Office Address: Mailing Address:		
1755 NORTH 6TH STREET 1755 NORTH 6TH STREET		
ORLANDO, FLORIDA 32820 ORLANDO, FLORIDA 32820		
		9
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's	Signature:	05 AON 50
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an indivi- business entity with an active Florida registration.)	dual or another	Z A
	Har-K	
The name and the Florida street address of the registered agent are:	고 면	AM 10: 52
ALLAN QUESNEL	STA	<u>Ö</u>
Name	Ŋπi	52
1755 NORTH 6TH STREET		
Florida street address (P.O. Box NOT acceptable)		
ORLANDO, FL 32820		
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 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:		
MGR	ALLAN QUESNELL 1755 NORTH 6TH STREET ORLANDO, FLORIDA 32820		
MGR	STEVEN BRUSO 1266 MULLET LAKE PARK ROAD GENEVA, FLORIDA 32732		
	AHAMA SS.	06 NOV 20	FILED
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date	te of filing: 11-16-2006 (OPTION	AM 10: 52()	IJ
(If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	pecific and cannot be more than five business d	ays prie	or

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.)

ALLAN QUESNEL

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)