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(Re	equestor's Name)	
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

107-11073

2-12-07

COVER LETTER

TO: Registration Division of C						
SUBJECT: STRA	USS PAINTING LLC (Name of Limite	ed Liability Compa	any)			
The enclosed Articles	of Organization and fee(s) are	submitted for filing	3 .			
Please return all corre	spondence concerning this matt	ter to the following	; :			
DAVID R	STRAUSS				_	
	ı	(Name of Person)				
STRAUS	S PAINTING LLC		<u> </u>		_	
		(Firm/Company)				
1104 Bea	aver Drive				_	
		(Address)				
Tarpon S	Springs, Florida 346	889				
	(City	y/State and Zip Code	:)			
For further information	n concerning this matter, please	e cail:				
David Strauss		_ at (<u>727</u> (Area Cod	, 439-439	0		
(Nar	ne of Person)	(Area Cod	e & Daytime To	elephone Number)		
Enclosed is a check	for the following amount:			TALL	200	
☐ \$125.00 Filing Fe	e \$\begin{aligned} \begin{aligned} \text{\$130.00 Filing Fee & Certificate of Status} \end{aligned}	Sertified Copy (additional copy	у	\$160.00 Filing Fee. Certificate of Status Certified Copy San (additional copy is enclosed)		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Addression Section of Corporation Building secutive Center see. FL 32301	ns DA	PH 3: 03	i van

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
STRAUSS PAINTING LLC	
Must end with the words "Limited Liability Company, "Limite	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:
1104 Beaver Drive	1104 Beaver Drive
Tarpon Springs, Florida 34689	Tarpon Springs, Florida 34689
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Name	TRAUSS
1104 13equei2	DR
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
TArpan Springs City, State, a	FL 34689
City, State, a	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity	accept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and
accept the obligations of my position as regis Registered Agent's Signature	stered agent as provided for in Chapter:608; F.S. Survey (REQUIRED)
(CONTIN	
Page 1 of 2	5-12-07

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Mana "MGRM" = Ma		Name and Address:
MGR		David R. Strauss
·		1104 Beaver Drive
		Tarpon Springs, Florida 34689
 		
	_ 	
(Use attachment	t if necessary)	
ICLE V: Effective	e date, if other than the disted, the date must be slate of filing.)	154
ICLE V: Effective affective date is li 90 days after the c	e date, if other than the disted, the date must be slate of filing.)	ate of filing: February 12, 2007 . (OPTIONAL) specific and cannot be more than five business days pri or an authorized representative of a member.
ICLE V: Effective affective date is li 90 days after the c	e date, if other than the disted, the date must be slate of filing.) IGNATURE: Signature of a member of the signature of the member of the section of the signature of the sid	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution attes an affirmation under the penalties of perjury
ICLE V: Effective affective date is li 90 days after the c	e date, if other than the disted, the date must be slate of filing.) IGNATURE: Signature of a member of this document constitution.	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution attes an affirmation under the penalties of perjury

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)