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Office Use Only



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SECRETARY OF STATE

W7-16958

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: PAIM BEI	(Name of Limite	d Liability Company)	L.L.C.	
The enclosed Articles of Organizati	on and fee(s) are s	ubmitted for filing.		
Please return all correspondence cor	ncerning this matte	er to the following:		
Michael	J.54	OL+15 Name of Person)		
Palm BEIT	CM Fla	Firm/Company)	. Lh,c,	
1281 Pla	12A CU	(Address)		
RivierA	BeACH (City	/Slate and Zip Code)	3404	
For further information concerning	this matter, please	call:		
Michael Shol (Name of Person)	14,5	at (56/ 633 (Area Code & Daytime To	elephone Number)	
Enclosed is a check for the follow	-		1007 FEB SECRET ALLAH	
\$125.00 Filing Fee \$130. Certifica	00 Filing Fee & te of Status	\$155.00 Filing Fee & Certified Copy	S160.00 Filing Fee, Certificate of Slatus &	Lecu
		(additional copy is enclosed)	Certified Copy C D (additional copy, is enclosed)	
	on Section of Corporations	Street/Courier Addres Registration Section Division of Corporatio Clifton Building		

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



February 6, 2007

MICHAEL SHOLTIS 1281 PLAZA CIRCLE RIVIERA BEACH, FL 33404

SUBJECT: PALM BEACH FLOOR & WINDOWS L.L.C.

Ref. Number: W0700006100

We have received your document for PALM BEACH FLOOR & WINDOWS L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct 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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 907A00008908

2007 FEB | 3 PH |2: 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
PALM BEACH Floor (Must end with the words "Limited Liability Company, "Limited	+ Wind Lows Ld Company" or their abbreviation "LLC," or "	<u>'</u> '(2,	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liabili	ty Com	pany is:	
Principal Office Address:	Mailing Address:			
1281 Plaza Cincle Riviera Beach, Fl 33404	SAME			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)				
The name and the Florida street address of the re-	egistered agent are: EL SHO / 705'			
1281 Plaza Florida street addi Riviewa Beach	ress (P.O. Box NOT acceptable) FL 33404			
City, State, at	nd Zip			
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered.	nis certificate, I hereby accept the ap . I further agree to comply with the formance of my duties, and I am fan	pointme provisio niliar wi	nt as ns of all th and	
Registered Agent's Signatu	ure (REQUIRED)	TALLAHA!	2007 FEB	er :
	•	IRY O	3	(204)
(CONTINU Page 1 of 2	J ED)	FLOI	PH 12:	E Arm
			••	

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.	MicHael J. SHOLLIS 1281 PlazaCircle APT#A RIVIERA BEACH, FI 33404
(Use attachment if necessary)	
ARTICLE V: Effective date. if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.)	ne date of filing: .(OPTIONAL) be specific and cannot be more than five business days prior

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.)

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 (Ontional)
- \$ 5.00 Certificate of Status (Optional)