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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516) 935-3940

Fax Number

: (516)935-3088



Jason LoPiccolo Drywall & Spray Textures LLC

Certificate of Status	1
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name

The name of the Limited Liability Company is: Jason LoPiccolo Drywall & Spray Textures LLC

## ARTICLE II - Address

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

Principal Office Address:		Mailing Address:	
3891 Carolina Drive		3891 Carolina Drive	
Lake Worth, FL 33461		Lake Worth, FL 33461	· · · · · · · · · · · · · · · · · · ·
程度 1		A Company of the Comp	
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ARTICLE III - Registered A		ce & Registered Agent's Signatur	07 MAR 27 SECRETARY FACILAHASSE
	Jason LoPiccole	).	27 ARN ASS
	,	. Name	TA B
	3891 Carolina I	Drive	8: 59 STATE LORIDA
	(P.O. Box or I	Mail Drop Box NOT Acceptable)	59 100
	Lake Worth, FI	_33461	
	(0	City / State / 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 - Jason LoPiccolo



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	Jason LoPiccolo-3891 Carolina Drive, Lake Worth, FL 33461
(Use attachment if necessary)	
REQUIRED SIGNATURE:	of a member authorized representative of a member.
(In accorda	nce with section 608.408(3), Florida Statutes, the execution of this assistances an affirmation under the penalties of perjury that the facts

Jason LoPiccolo

Typed or printed name of signee

07 MAR 27 AH 8: 59
SECRETARY OF STATE
TALLAHASSEF FLORINA