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(Business Entity Name)	-
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SECRETARY OF STATEMS
DIVISION OF CORPORATIONS
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TO:

Registration Section

Division of Corporations

BRUSHWELL HOUSE PAINTING 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:

TEFF HATTAN

(Name of Person)

BRUSHWEZL HOUSE PANTING LLC

(Firm/Company)

Y217 AUCKLAND RD #4 (Address) PACE FL 32571

For further information concerning this matter, please call:

TEFF HATTAN at (850) 994 3352

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$125.00 Filing Fee

ρ \$130.00 Filing Fee &

Certificate of Status

ρ \$155.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

ρ \$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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# **ARTICLE I - Name:**

The name of the Limited Liability Company is:

BRUSHWELL HOUSE PAINTING LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC.,")

## **ARTICLE II - Address:**

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

Principal Office Ad	ldress:	Mailing Address:	-
4217 AUCK PACE F	LAND RD #4 L 32571	42/7 AUCK PACE FL	12AND RD #4 32571_
(The Limited Liability Conbusiness entity with an ac	gistered Agent, Registered pany cannot scrve as its own Registive Florida registration.)  orida street address of the	stered Agent. You must designate	
• _	JEFF H	· · · · · · · · · · · · · · · · · · ·	PH PH
	4217 AUCKLA		2: 38
-	Florida street ad PACE City, State,	Idress (P.O. Box <u>NOT</u> acceptal FL 3257/ and Zip	ble)

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..

(CONTINUED)

Title:		r or Managing Member is as follows: CABLE (NO MANAGERS)  Name and Address:	
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effective date is to or 90 days after	the date of filing.)  GNATURE:  Signature of a member	or an authorized representative of a member.	
effective date is to or 90 days after	The date of filing.)  GNATURE:  Signature of a member  (In accordance with sect	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution	
effective date is to or 90 days after	The date of filing.)  GNATURE:  Signature of a member  (In accordance with sect	or an authorized representative of a member.  ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury	
effective date is to or 90 days after	Signature of a member  (In accordance with sect of this document constit that the facts stated he	or an authorized representative of a member.  ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)