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PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BILAVO DECORATIVE CONCRETE (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:	
HENDERSON LATISHA E (Name of Person)	t week.
BRAYO DECORATIVE CONCRETE (Firm/Company)	je - ++2
1305 WATERLINE DR. (Address)	-
TAU. FL. 32303	e e e e e e e e e e e e e e e e e e e
(City/State and Zip Code) TALL AHASSI For further information concerning this matter, please call: AHASSI SSI	T
(Name of Person) at (Area Code & Daytime Telephone Number)	П
Enclosed is a check for the following amount:	
S125.00 Filing Fee S130.00 Filing Fee S155.00 Filing Fee S160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status	
Mailing Address Street/Courier Address Registration Section Registration Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:	
BRAND DECOUNTIVE CONC. (Must end with the words "Limited Liability)	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1305 WATERLINE DR. TALL. FL. 32303	1305 WATERLINE Dr. TALL, FL 32303
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: ared Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
1305 WATERUNE Florida street add	ress (P.O. Box NOT acceptable)
TAUAHASSEE City, State, as	FL 37303
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	sccept service of process for the above stated limited as certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGRM	HENDERSON LATISHA E. 1305 WATERLINE DE. TALL, FL. 32303
	
	<u> </u>
(Use attachment if necessary) LE V: Effective date, if other the ffective date is listed, the date is	nan the date of filing:
LE V: Effective date, if other the frective date is listed, the date is days after the date of filing.)	nan the date of filing:
LE V: Effective date, if other the ffective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE:	nan the date of filing:
LE V: Effective date, if other the ffective date is listed, the date is days after the date of filing.) REOUIRED SIGNATURE: Signature of a (In accordance of this document	nust be specific and cannot be more than five business days A. E. T. Leveluson A. E. C. L. C. L

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)