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SECRETARY OF STATE

COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: Integrity Building & Design LLC (Name of Limited Liability Company)			
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Frances .	J. Lundberg		
	(Name of Person)	
Integrity E	Building & Design		
	(Firm/Company)	
312 View	/ Point Place		
		(Address)	
St. Augustine, Florida 32080			
	(City.	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Frances J. Lun		at (904 347-68	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check fo	r the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Integrity Building & Design LLC	
(Must end with the words "Limited Liability Company, "Limited Com	npany" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the princip	oal office of the Limited Liability Company is:
Principal Office Address: Ma	ailing Address:
312 View Point Place 312	egrity Building & Design LLC 2 View Point Place Augustine, Florida 32080
ARTICLE III - Registered Agent, Registered Offi (The Limited Liability Company cannot serve as its own Registered A business entity with an active Florida registration.)	Agent. You must designate an individual or another 250000
The name and the Florida street address of the registered agent are:	
LAW OFFICE OF TERRY J. S	SHOEMAKER LLC PROBLEM AND SHOEMAKER LLC
1260 North Ponce d ⁴ Leon B Florida street address (I	
St. Augustine, FL City, State, and Zip	32080
Having been named as registered agent and to acceptiability company at the place designated in this ceregistered agent and agree to act in this capacity. If a statutes relating to the proper and complete perform accept the obligations of my position as registered.	ertificate, I hereby accept the appointment as urther agree to comply with the provisions of all nance of my duties, and I am familiar with and

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Frances J. Lundberg 312 View Point Place St. Augustine, Florida 32080 MGRM Peggy A. Rutherford 13624 Dunwoody court Hydson, Florida 34667 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Frances J. Lundberg

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