

W07000107253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

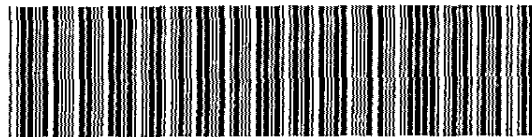
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TALLAHASSEE, FLORIDA

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**RICHARD W. WOOD**

ATTORNEY AT LAW

4900

~~4947~~ Manatee Avenue West, Suite ~~200~~ 103  
Bradenton, Florida 34209

(941) 749-0411

Fax (941) 747-0311

E-mail: r\_w\_wood@msn.com

Mailing Address

P.O. Box 1353

Bradenton, Florida 34206

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

**SUBJECT: DOWN UNDER COATINGS, LLC, A FLORIDA 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:

**RICHARD W. WOOD, ESQ.**  
4900 MANATEE AVE W STE 103  
BRADENTON, FL 34209

For further information concerning this matter, please call:

RICHARD W. WOOD, ESQ. at (941) 749-0411

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**ARTICLES OF ORGANIZATION  
FOR  
DOWN UNDER COATINGS, LLC,  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – NAME:**

The name of the Limited Liability Company is: **DOWN UNDER COATINGS, LLC**

**ARTICLE II – ADDRESS:**

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

**PRINCIPAL OFFICE ADDRESS:**

8194 Natures Way Apt. 33  
Bradenton, FL 34202

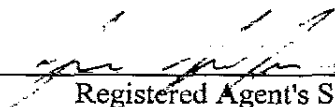
**MAILING ADDRESS:**

8194 Natures Way Apt 33  
Bradenton, FL 34202

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, AND  
REGISTERED AGENT'S SIGNATURE:**

MARC LEHMAN  
8194 Natures Way Apt 33  
Bradenton, FL 34202

*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 am familiar with and accept the obligations of my position as registered agent as provided by in Chapter 608, Florida Statutes.*

  
\_\_\_\_\_  
Registered Agent's Signature

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**ARTICLE IV – MANAGER(S) OR MANAGING MEMBER(S):  
THE NAME AND ADDRESS OF EACH MANAGER OR MANAGING MEMBER  
IS AS FOLLOWS:**

**Title:**

**Name and Address:**

MGR/MBR

MARC LEHMAN  
8194 Natures Way Apt 33  
Bradenton, FL 34202

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
MARC LEHMAN

(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.)

MARC LEHMAN

\_\_\_\_\_  
Typed or printed name of signee

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