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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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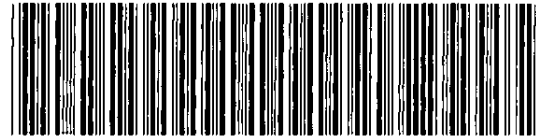
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

B. KOHR

MAY 19 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 575649 80573A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : May 19, 2008

ORDER TIME : 11:35 AM

ORDER NO. : 575649-005

CUSTOMER NO: 80573A

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08 MAY 19 PM 2:55  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: ACCENT PAVERS, LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - EXT. 2933

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
ACCENT PAVERS, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

Article I - Name

The name of the Limited Liability Company shall be: ACCENT PAVERS, LLC

Article II - Address

The mailing address and street address of the principal office of the company is: 29 Coquina Ridge Way, Ormond Beach, Florida 32174.

Article III - Duration

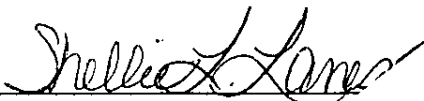
The company shall have perpetual existence.

Article IV - Registered Office and Agent

The name and street address of the registered office and registered agent's are

Shellie L. Lanes  
29 Coquina Ridge Way  
Ormond Beach, Florida 32174

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.



Shellie L. Lanes  
Registered Agent

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The names and addresses of each Managing Member are as follows:

Shellie L. Lanes

29 Coquina Ridge Way  
Ormond Beach, Florida 32174

John M. Lanes

29 Coquina Ridge Way  
Ormond Beach, Florida 32174

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these Articles of Organization at Ormond Beach, Florida, on May 16, 2008.



Shellie L. Lanes  
Managing Member



John M. Lanes  
Managing Member