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JUN - 2 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Screen	n Builders Partnei	rs, LLC	
30MEC1.		ited Liability Company)	
The enclosed Articles of	Organization and fee(s) are	e submitted for filing.	
Please return all correspondence	ondence concerning this ma	atter to the following:	
Daniel J. B	Brams, Esq.		
		(Name of Person)	
Silver, Lev	y, Feldman, Bas	s & Brams, P.A.	
		(Firm/Company)	
500 South	Australian Avenu	ue, Suite 800	
		(Address)	
West Palm	n Beach, FL 3340	01	
	(Ci	ity/State and Zip Code)	
For further information of	concerning this matter, pleas	se call:	2008 JUN -2 SECRETARI TALLAHASBI
Ellen Webb		_{at (} 561 ₎ 659-0551	ETA.
(Name	of Person)	(Area Code & Daytime Telephone Number)	[33]
Enclosed is a check fo	r the following amount:	·	PH 3: 0
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Certified Copy Certificate of Certified Copy (additional copy is enclosed)	f Status &
	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	

water of the

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Screen Builders Partners, LLC	
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8451 McAllister Way	8451 McAllister Way
West Palm Beach, FL 33411	West Palm Beach, FL 33411
(The Limited Liability Company cannot serve as its own I business entity with an active Florida registration.) The name and the Florida street address of the street address of	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
	· · · · · · · · · · · · · · · · · · ·
Daniel J. Brams, I	
500 South Austra	lian Avenue, Suite 800
	<u> </u>
	ate, and Zip I to accept service of process for the above stated limited

accept the obligations of my position arregistered agent as provided for in Chapter 608, F.S..

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

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" ≈ Manager	Name and Address:
"MGRM" = Managing Memb	er
Jim Trimble MGK	8451 McAllister Way
<u> </u>	West Palm Beach, FL 33411
Mike Sonsini Will	DAFA Na Alliston Mon.
WIRE SOUSIN TO COLOR	8451 McAllister Way West Palm Beach, FL 33411
A	
Bob DeMarco Make	8451 McAllister Way
	West Palm Beach, FL 33411
(Use attachment if necessary)	
•	han the date of filing: (ODTIONAL)
CLE V: Effective date, if other t	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days i
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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