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(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
L. SELLERS		
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**08 AUG -4 AH 8: 07** Secretary of State

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Accounting

Bookkeeping

Income Taxes

Insurance

Tax Consulting

July 17, 2008

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

Re: SCOTTIE'S PAINTING, LLC

Enclosed, please find two copies of The Articles of Organization for: SCOTTIE'S PAINT-ING, LLC.

Check # 15307 in the amount of \$ 125.00 is enclosed for same.

Please file and return to this office for further processing.

Thank you very much.

Sincerely,

TROUP EINANCIAL SERVICES

Robert G. Troup

encl.: Articles of Organization

Check # 15307

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I NAME

The name of the Limited Liability Company is: SCOTTIE'S PAINTING, LLC

## ARTICLE II ADDRESS

The mailing address and street address of the principal officer of the Limited Liability Company is:

**Principal Office Address** 

**Mailing Address** 

4970 South Peninsula Drive Ponce Inlet, FL 32127 4970 South Peninsula Drive Ponce Inlet, FL 32127

#### ARTICLE III REGISTERED AGENT, REGISTERED OFFICE

The name and the Florida street address of the Registered Agent is:

O8 AUG -4 AM 8: 07
SECRE PAINT OF STATE
TALL AHASSEE FLORID

Scott Graham 4970 South Peninsula Drive Ponce Inlet. FL 32127

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, Florida Statutes.

Registered Agent

## ARTICLE IV MANAGERS OR MANAGING MEMBERS

TITLE

**NAME AND ADDRESS** 

**General Manager** 

Scott Graham
4970 South Peninsula Drive
Ponce Inlet, FL 32127

#### ARTICLE V EFFECTIVE DATE

The effective date of this Limited Liability Company shall be: The Article Filing Date

Scott Graham

Member or Authorized Representative

(In accordance with Section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

Scott Graham
Printed Name of Signee

Before me, the aforesigned personally appeare	d, who being known to me to	be Scott Graham.
acknowledged that he executed the foregoing		
acceptance for SCOTTIE'S PAINTING, LLC.		

State of Florida County of Volusi

ROBERT G. TROUP
NOTARY PUBLIC, STATE OF FLORIDA
MY Comm. Expires SEPT. 9, 2008
COMM. # DD333076

totary Public

Date: 7/17/08

TITU