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D. BRUCE

AUG 14 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: HOWARD MASKA PAINTIFF & POESSURE WAShing LLE (Name of 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:
HOWARD S. MARSMI TR (Name of Person)
Marchall Paining & Pressure Washing (Firm/Company)
521 S. CONE STO (Address)
QUINES F1. 3235/ (City/State and Zip Code)
For further information concerning this matter, please call:
16 JARD MArshall at (850) 627-2161
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & }\times \text{\$155.00 Filing Fee & }\times \text{\$160.00 Filing Fee,} \\ \text{Certificate of Status} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \\ \text{(additional copy is enclosed)} \text{Certified Copy} \\ \text{(additional copy is enclosed)}
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Mailing Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

HOWARD MARSHALL PAINTING  (Must end with the words "Limited Liability)	y Company, "L.L.C.," or "LLC.")	6
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
521 S. CONE ST. DUTUCY, Fl. 32351	521 S. Cent 51- JUINOU FA- 32351	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)		Π
The name and the Florida street address of the re	υ · · · · · · · · · · · · · · · · · · ·	こりつ
	UE ST- ORIE	

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.

Registered Agent's Signature (REQUIRED)

(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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) \_. (OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing: (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:** nature of a member of 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.)

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)

yped or printed name of signee