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EXAMINER

3. COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:

PAULNOTX LLC

(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:

-		Gerald A Dechow	
		Harry Haskins Esq	8 NOV-
3400 S. Tamiami Trail, Suite 201		SSE TO	
Sarasota, Fl 34239		Only 5	
For further information concerning this matter, please call:			
Gerald A Dec	chow	941 554 2174 Gad	lechow43@aol.com
Enclosed is a check for	or the following amount:		Ti e
.\$125.00 Filing Fee.	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	. \$160.00 Filing Feet? Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The Name of the Limited Liability Company is:

PAULNOTX LLC

ARTICLE II: Location

The mailing address of and street address of the Limited Liability company

Principal Office:

3400 S. Tamiami Trail, Ste 201

Sarasota, Fl 34239

Mailing Address:

SON TIMES

3400 S. Tamiami Trail, Ste 201

Sarasota, Fl 34239

Article III: Registered Agent, Registered Office & Registered Agent Signature:

The name and the Florida Street Address of the registered agent are

Name:

Harry W. Haskins

Florida Address:

3400 S. Tamiami Trail, Ste 201

City, State Zip

Sarasota, Florida 34239

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 reflating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent provided for in Chapter 608, F.S.

Signature of Registered Agent

Harry W/ Haskins

ARTICLE IV : Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR"= Manager

"MGRM"= Managing Member

Title:

Name and Address:

MGR

Anthony Spina 7350 S. Tamiami Trail #82 Sarasota, FI 32431-7004

ARTICLE V: The effective date shall be the date of filing.

REQUIRED SIGNATURE:

Signature of a Member of the authorized representative of a Member.

Signature

(In accordance with section 608.408(3), Florida statutes, the execution of this document constitutes an affirmation under the penalty of perjury that the facts stated herein are true.)

Harry W. Haskins =Printed name of signee