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(R	equestor's Name)	_
(Ai	ddress)	<u>. </u>
(A	ddress)	
(C	ity/State/Zip/Phone #)	,
PICK-UP	WAIT	MAIL
(Be	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

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DEFAR CHERT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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COVER LETTER

TO:	Registration Division of	n Section Corporations		
SUBJI	ect: <u>I</u>	Name of Lin	PAINTING AND E	DESIGN LLC
The en	closed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	spondence concerning this m	natter to the following:	
		ERIC J	SCHNE (DER (Name of Person)	
			(Name of Person)	
	<u>I</u>	NNOVATIVE PA	4 CNTING AND (Firm/Company)	DESIGN LLC
		55/3 WESTVI	en lane	
•			(Address)	
		TAUAHA	5588,FL. 323	310
		((City/State and Zip Code)	
For furt	ther informatio	n concerning this matter, plea	ase call:	
Ł	ERIC Sc	HNEIDER	at (<u>850</u>) <u>54</u> (Area Code & Daytime	5-1564
	(Nan	ne of Person)	(Area Code & Daytime	e Telephone Number)
Enclos	ed is a check	for the following amount:	,	
1 \$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed	S160.00 Filing Fee, Certificate of States & Certified Copy (additional Envis emposed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle RY OF STATE O

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")					
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:					
Principal Office Address: Mailing Address:					
55/3 WESTVIEW LANE 55/3 WESTVIEW LANE TALLAHASSEE FC. 32310 TALLAHASSEE, FL. 32310					
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)					
The name and the Florida street address of the registered agent are:					
ERIC J. SCHNEIDER Name					
Name					
55/3 WESTVIEW LANE					
Florida street address (P.O. Box NOT acceptable)					
TAUAHASSEE FL FL. 32310 City, State, and Zip					
City, State, and Zip					
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 the proper familiar with and accept the obligations of my position as registered agent as provided for the Chapter 608, F.S Registered Agent's Signature (REQUIRED)					

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM.	ERIC J. SCHNEIDER 5613 WESTVIEW LANG TALLOHASSIES, FL. 3-2310
MGFM	KRIS PECKHAM 5604 WESTVIEW LANE TALLAHASSES, FL. 32316
(Use attachment if necessary)	
	ne date of filing: 3-26-09 (OPTIONAL) be specific and cannot be more than five business days p
REQUIRED SIGNATURE:	

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)

Page 2 of 2

(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.)

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ERIC J. SCHNEIDER
Typed or printed name of signee