LICONO 20366

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

EFFECTIVE BATE2/10/10



000167251030

02/23/10--01009--019 **130.00

FILED 10 FEB 16 PM 2: 37 SECRETARSEE, FLORIDA

D. BRUCE

FEB 2 3 2010

EXAMINER



February 16, 2010

BRUNO COUTINHO 4700 NW 4TH AVENUE POMPANO BEACH, FL 33064

SUBJECT: ROYAL COATING & REMODELING, LLC

Ref. Number: W1000007812

We have received your document for ROYAL COATING & REMODELING, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$130.00.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 510A00003842

FILED

10 FEB 16 PH 2: 37

SECRETARY OF STATE

COVER LETTER

TO:	Registration Division of C	ı Section Corporations				
SUBJE	€CT•	ROYAL COA	TING & REMODELII	NG, LLC.		
20202		Name of Lin	nited Liability Company	······		
The en	closed Articles	of Organization and fee(s) an	re submitted for filing.			
Please	return all corre	spondence concerning this m	atter to the following:			
·		BR	UNO COUTINHO			
			Name of Person			
		ROYAL COAT	TING & REMODELING,	LLC.		
			Firm/Company		JAK Jee	5
		4700	NW 4TH AVENUE		AH	[
			Address		SSE	EB 16 PH 2: 3
-	·		NO BEACH, FL 33064		<u> </u>	79
		C	City/State and Zip Code		. ORIC	γ: ω
-		E-mail address: (to be used	for future annual report notification	on)	30	
For furt	ther information	n concerning this matter, plea	se call:			
		O COUTINHO e of Person	at (954) . Area Code & Daytime	548-2442		
	Nami	e of Person	Alea Code & Daytine	reseptione (Authori		
Enclose	ed is a check t	for the following amount:				
]\$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed	\$160.00 Fili Certificate Certified Co (additional co	of Status opy	&
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3236	ions er Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Con	npany is:
	G & REMODELING, LLC. mited 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:
4700 NW 4TH AVENUE	4700 NW 4TH AVENUE
POMPANO BEACH, FL 33064	POMPANO BEACH, FL 33064
	SA
BRI	JNO COUTINHO
	Name SE 3
4700	NW 4TH AVENUE
Florida street add	dress (P.O. Box NOT acceptable)

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 (REOURED)

POMPANO BEACH, FL 33064

City, State, and Zip

Page 1 of 2 (CONTINUED)



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" = Mana "MGRM" = Ma	nger nnaging Member		
MGRM		DDUNG COUTING	
WIGKW		BRUNO COUTINHO	
		4700 NW 4TH AVENUE	
		POMPANO BEACH, FL 33064	
			
			
			~,
(Use attachment	if necessary)		
LE V: Effective	date, if other than the dated, the date must be	ate of filing: 02/10/2010specific and cannot be more than five b	. (OPTIONA) Dusiness days
LE V: Effective fective date is lis	date, if other than the dated, the date must be ate of filing.) GNATURE:		ousiness days
LE V: Effective fective date is lis days after the d	date, if other than the dated, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with sections)	or an authorized representative of a member on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjur	ousiness days
LE V: Effective fective date is lis days after the d	date, if other than the dated, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with section of this document constitution that the facts stated hereigness.	or an authorized representative of a member on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjur	ousiness days
LE V: Effective fective date is lis days after the d REQUIRED SI	date, if other than the dated, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with section of this document constitution that the facts stated hereing being the section of the section of the facts stated hereing being the section of the s	or an authorized representative of a member on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjurin are true.)	ousiness days
LE V: Effective fective date is lis days after the d	date, if other than the dated, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with section of this document constitution that the facts stated hereing being the section of the section of the facts stated hereing being the section of the s	or an authorized representative of a member on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjurin are true.)	10 FEB 16
LE V: Effective fective date is list days after the description of the	date, if other than the dated, the date must be late of filing.) GNATURE: Signature of a member (In accordance with section of this document constitution that the facts stated hereing the late of the facts stated hereing the late of the late o	or an authorized representative of a member on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjurin are true.) RUNO COUTINHO Ed or printed name of signee	10 FEB 16 PM
LE V: Effective fective date is list days after the description of the feet of REQUIRED SI Filing Fees \$125.00 Filing I of Reg	date, if other than the dated, the date must be late of filing.) GNATURE: Signature of a member (In accordance with section of this document constitution that the facts stated herein the facts stated herein the facts	or an authorized representative of a member on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjurin are true.) RUNO COUTINHO Ed or printed name of signee	10 FEB 16 PM

RS DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023

Date of this notice: 02-10-2010

Employer Identification Number:

27-1873321

Form: SS-4

Number of this notice: CP 575 A

ROYAL COATING & REMODELING LLC BRUNO COUTINHO SOLE MBR 4700 NW 4TH AVE POMPANO BEACH, FL 33064

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, AFTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN)

EIN 27-1873321. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records. records.

When filing tax documents, payments, and related correspondence, it is very important that you use your BIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

> Form 941. Form 940

07/31/2010 01/31/2011

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, Electronic Choices to Pay All Your Federal Taxes and Publication 4248, EFTPS (Brochure). If you need to make a deposit before you receive your Welcome Package, please visit an IRS taxpayer assistance center to obtain a Federal Tax Deposit Coupon, Form 8109-B. To locate the taxpayer assistance center nearest you, visit the IRS Web site at http://www.irs.gov/localcontacts/index.html. Note: You will not be able to obtain Form 8109-B by calling 1-800-829-TAXFORMS (1-800-829-3676).