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(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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TO MAR 15 PH 2: 33
SECRETARY OF STATE
TALLAHASSEE, FI OBINA

S. HAWKES

MAR 1 6 2010

EXAMINER

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Falcon Polishing & Decorative Concrete, LLC				
	Name of Limit	ted Liability Company		
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.		
Please return all correspondence concerning this matter to the following:				
Daniel L. Lagemann				
		Name of Person		
Falcon Contr	actors, Inc.			
		Firm/Company		
3539 Plover	Avenue			
<del></del>		Address		
Naples, FL 3	4117			
		ty/State and Zip Code		
daniel.lagemann@falcon-contractors.com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Daniel L. Lageman	n	at ( 239 ) 455-3421		
Name	of Person	Area Code & Daytime Telep	hone Number	
Enclosed is a check for the following amount:				
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	■\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, 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 Ci Tallahassee, FL 32301	rele	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

· · · · · ·

ARTICLE I - Name:	
The name of the Limited Liability Compa	any is:
-	·
Falcon Polishing & Decorative Cor	icrete, LLC
(Must end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	500 3
The mailing address and street address of	the principal office of the Limited Liability Company of
Principal Office Address:	Mailing Address:
	P <sup>*</sup>
3539 Plover Avenue	PO Box 990043
Naples, FL 34117	Naples, FL 34116-6060
	stered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	n Registered Agent. You must designate an individual or another
The name and the Florida street address of	of the registered agent are:
lay D. Hillia	

0

Name

869 B 97th Avenue N.

Florida street address (P.O. Box NOT acceptable)

Naples

FL 34108-2284

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 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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	Election of the second of the
MGR	Daniel L. Lagemann
	125 31st Street NW
	Naples, FL 34120
MGRM	Lisa A. Lagemann
	125 31st Street NW
	Naples, FL 34120
	1979-1-100-1-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1
<del></del>	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the	date of filing: 5-1-2010 (OPTIONAL)
	e specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	1 . 0 . 1
March	X Laum_
Signature of a membe	r or an authorized representative of a member.

Daniel L. Lagemann

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)