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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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D. BRUCE
MAY 1 0 2010
EXAMINER



COVER LETTER

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iO:

Registration Section Division of Corporations

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donald Roberts	
(Name of Person)	
Donald Roberts Painting LLC (Firm/Company)	
(Firm/Company)	
1804 E, KNOLLWOOD ST.	
(Address)	
Jampa FL 33610	115 Wasan
(City/State and Zip Code)	
For further information concerning this matter, please call:	រាជ្ជ
DONALD Roberts at (813) 494-7172 :	J
(Name of Person) (Area Code & Daytime Telephone 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 Circle Tallahassee, FL 32301

· ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Donald Roberts Painting LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Si (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual business entity with an active Florida registration.)		
The name and the Florida street address of the registered agent are:	14 S	
Donald Roberts	A	
1804 E. KNOII WOOD 5+-	TO PH	
Florida street address (P.O. Box <u>NOT</u> acceptable) FL 33610 City, State, and Zip	2:46	O

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)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	
1000011	n elol, um
-MGR	DONALD ROBERTS 1804 E. KNOIIWOOD ST.
	Tampo E1 33618
9	
MGRM	Veborah Koberts
	Tompa FL 33610
····	
	
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(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·
CLE V: Effective date, if other than the	he date of filing: . (OPTIONAL)
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effective date is listed, the date mu to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a memi (In accordance with sof this document con	ber or an authorized representative of a member.
REQUIRED SIGNATURE: Signature of a memilian accordance with sof this document conthat the facts stated	ber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury therein are true.)
effective date is listed, the date mu to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a memi (In accordance with s of this document con that the facts stated	ber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)