(Requestor's Name)				
	(Address)			
	/A.I.I.			
(Address)				
	(City/State/Zip/Phone #)			
	(Only/Olate/Zip/) Hollo I//			
☐ PICK-UF	P WAIT MAIL			
(Business Entity Name)				
(Document Number)				
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Certified Copies	Certificates of Status			

Special Instructions to Filing Officer:

L. SELLERS

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EXAMINER

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

то:	Registration S Division of Co				
SUBJI	SUBJECT: Plaster World of Vero Beach				
		Name of Limit	ed Liability Company		
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
	Dennis Sprud	ee			
	Name of Person				
Plaster World					
	Firm/Company				
	1355 us1 suite5				
			Address		
	Vero Beach F	Fl. 32960			
City/State and Zip Code					
,	dennisspruce	@hotmail.com	Car future annual report notification)		
E-mail address: (to be used for future annual report notification)					
For tur	ther information	concerning this matter, please	e call:		
Dennis Spruce			at (772-696-1183)		
	Name	of Person	Area Code & Daytime Telephone Number		
Enclos	sed is a check for	or the following amount:			
□\$125	.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing For Certificate of State Certified Copy (additional copy is enclosed)	tus &	
		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 Comp	pany is:	
Plaster World of Vero Beach LLC		
	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	of the principal office of the Limited	l Liability Company is:
Principal Office Address:	Mailing Address:	
1355 us 1 Suite 5	1355 us1 Suite5	
Vero Beach Fl.32960	Vero Beach Fl,32960	
business entity with an active Florida registration.) The name and the Florida street address Dennis Spruce	of the registered agent are:	
5955 41 St.	street address (P.O. Box NOT acceptable)	
	· — ·	
Vero Beach	FL 32967 City, State, and Zip	
•	ated in this certificate, I hereby accep capacity. I further agree to comply uplete performance of my duties, and	pt the appointment as with the provisions of all I am familiar with and
`	Page 1 of 2	

RETARY OF STATE

To a Structure

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" = Manager "MGRM" = Managing Member MGR Dennis Spruce po box 5028 Vero Beach Fl 32960 **MGRM** Danny Spruce 2020 west Calle Marita Phoenix Az.85085 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: _. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member of an authorized representative of a member. (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

Dennis Spruce

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee