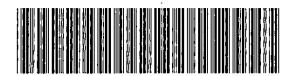
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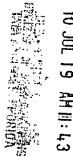
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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T. HAMPTON
JUL 1 9 2010
EXAMINER

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: TUHON'S Painting LLC  Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Melooly Tutton DK
Tutton's Painting LLC
2478 Concord Rd.
Hayana, FL 32333
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Melody Tutton at 850, 59-1198  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Matthew Address

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

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

**Mailing Address:** 

**ARTICLE I - Name:** 

**ARTICLE II - Address:** 

**Principal Office Address:** 

business entity with an active Florida registration.)

The name of the Limited Liability Company is:

The name and the Florida street address of the registered agent are:	
Melody Tutton	
1	
2478 Concord Rd.	
Florida street address (P.O. Box <u>NOT</u> acceptable)	
Havana FL 32333	
City, State, and Zip	
Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate, I hereby accept the apperegistered agent and agree to act in this capacity. I further agree to comply with the pastatutes relating to the proper and complete performance of my duties, and I am family accept the obligations of my position as registered agent as provided for in Chapter	ointment as rovisions of all liar with and
Registered Agent's Signature (REQUIRED)	SECKE TALLAH
(CONTINUED)	₩ I
Page 1 of 2	აგ.≂ა <b>ად</b> ლ-≺

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Melody Tutton 2478 Concora Rd. Havara Fl 32333	
······································		
in effective date is listed, the date mus	the date of filing: (OPTIONAL) It be specific and cannot be more than five business days p	orior
TICLE V: Effective date, if other than	the date of filing: (OPTIONAL) It be specific and cannot be more than five business days p	orior
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