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(Requ	uestor's Name)	
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(City/s	State/Zip/Phone #)	<u> </u>
PICK-UP	WAIT I	MAIL
(Busi	ness Entity Name)	
(Docu	ument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Fil	ling Officer:	

A. LUNT

AUG 1 0 2010

EXAMINER

Office Use Only



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COVER LETTER

Registration Section

Division of Co	orporations					
CUBICS. Matthew	v B. Benson Handymar	and Painte	er JI C			
SUBJECT: Matthew	Name of Limit					
	f Organization and fee(s) are		-			
Mathew B. Be	encon.					
Matriew D. De	3113011	Name of Perso	n		70 2	
					ALLAH TANG	\$ c.)
Matthew B. B	enson Handyman and P				£5, 6	-
		Firm/Company	y		9	*****
6727 Flintwoo	vd Straat				PA PA	77
0727 1 11111100	d Outet	Address			0H -	•
					言	
Navarre FL 32					T	
		y/State and Zip	Code			
free1968@gm	nail.com E-mail address: (to be used)	Confederation			 	
	·		report nonneanon)	l		
For further information	concerning this matter, please	e call:				
Mathew B. Benson		at (_850	\936-0467	7		
	of Person	Area	Code & Daytime Te			
Enclosed is a check for	or the following amount:					
□\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified		Certificate Certified C (additional co	of Status &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regis Divis Clifto 2661	st/Courier Address stration Section sion of Corporatio on Building Executive Center hassee, FL 32301	ns : Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Matthew B. I	Benson Handvma	an and Painter, LLC		
		"Limited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II	Address			
		ress of the principal office of the Limited L	iability Company	is:
Principal Offi	ce Address:	Mailing Address:		
6727 Flintwood Str	eet	6727 Flintwood Street		
Navarre FL 32566	· · · · · · · · · · · · · · · · · · ·	······································		
		Navarre FL 32566		
(The Limited Liabil business entity wit	the Florida street add Mathew B. Ben 6727 Flintwood	, Registered Office, & Registered Agent' as its own Registered Agent. You must designate an indivion.) Iress of the registered agent are: ISON Name	vidual or another 2010 AUG -9 ALLAHASSEE	
(The Limited Liabil business entity wit	the Florida street add Mathew B. Ben 6727 Flintwood	, Registered Office, & Registered Agent' as its own Registered Agent. You must designate an indivion.) Iress of the registered agent are: Inson Name	vidual or another	

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:

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		2
MORW — Managing Member		
MGR	Mathew B. Benson	E E
	6727 Flintwood Street	\$ 15 A
	Navarre FL 32568	(Pica
		T.S.
**************************************	**************************************	95 - 1
		<u> </u>
		
	*********	<u> </u>
•		
(Use attachment if necessary)		
(Ose attachment if necessary)		
CLE V: Effective date, if other than the	date of filing: 9 August 2010	. (OPTIONAL)
effective date is listed, the date must be		
0 days after the date of filing.)	•	
DECLIDED OVER A TUDE		
REQUIRED SIGNATURE:		
\mathcal{M} .	0	
: 1 Hothers L	Kanom	
Signature of a membe	r or an authorized representative of	a member.
(In accordance with sec	tion 608.408(3), Florida Statutes, the	avacution

Filing Fees:

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

Mathew B. Benson

that the facts stated herein are true.)

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

Typed or printed name of signee