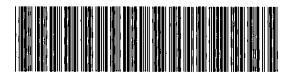
| - (                  | Requestor's Name)        |
|----------------------|--------------------------|
| (                    | (Address)                |
| (                    | (Address)                |
| (                    | (City/State/Zip/Phone #) |
| PICK-UP              | Wait Mail                |
| (                    | (Business Entity Name)   |
| (                    | (Document Number)        |
| Certified Copies     | Certificates of Status   |
| Special Instructions | to Filing Officer:       |
|                      | A. LUNT                  |

Office Use Only

JAN 18 2010

EXAMINER



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## **COVER LETTER**

| TO:       | Registration of | n Section<br>Corporations  |   |   |
|-----------|-----------------|--|---|---|
| SUBJE     | ст:3            | De Argelos Bu<br>Name of Lin   | nited Liability Company   |   |
| The enc   | losed Article   | es of Organization and fee(s) a  | re submitted for filing.  |   |
| Please re | eturn all corr  | espondence concerning this m   | atter to the following:   |   |
|           |                 | Johnathon D  | Name of Person  | - |
| -         | -               | De Angelos   | Builders LLC Firm/Company   | - |
| _         |                 | 5046 Boxi  |   | _ |
| _         |                 |  | Address  32303  City/State and Zip Code  O Y Choo. Com  Odor Juture annual report notification)   | _ |
| For furth | _               | E-mail address: (1) be use on concerning this matter, plea                                       |   |   |
| De        | 'Angel          | me of Person   | at ( <u>\$50</u> ) <u>212 - 8094</u><br>Area Code & Daytime Telephone Number  |   |
| Enelose   | d is a check    | for the following amount:  |   |   |
| 125.00    | Filing Fee      | \$130.00 Filing Fee & Certificate of Status  | S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)        |   |
|           |                 | Mailing Address Registration Section Division of Corporation 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:  |
|--|
| De Angelos Builders LLC  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")   |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  |
| Principal Office Address: Mailing Address:   |
| 5046 Boxwood Cy Tollohossee Fly 22203  |
| 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 business entity with an active Florida registration.)  |
| The name and the Florida street address of the registered agent are:  Johnathon Name  SO46  Rexused Ln   |
| Florida street address (P.O. Box NOT acceptable)   |
| 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 |

(CONTINUED)

| <u>l'itle:</u><br> MGR" = Manager   | Name and Address:  |
|---|--|
| MGRM" = Managing Member   | ASS.   |
| MERM  | Johnathon D. House Say   |
|   | Tallahasree Pl, 32303 25   |
|   | 7  |
| <del></del>   |  |
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| Use attachment if necessary)  | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \  |
| E V: Effective date, if other than the  |  |
| E V: Effective date, if other than the ective date is listed, the date must l   | e date of filing: (OPTION be specific and cannot be more than five business da |
| E V: Effective date, if other than the ective date is listed, the date must l   |  |
| EV: Effective date, if other than the ective date is listed, the date must lays after the date of filing.)  |  |
| E V: Effective date, if other than the ective date is listed, the date must l   |  |
| EV: Effective date, if other than the ective date is listed, the date must lays after the date of filing.)  |  |
| EV: Effective date, if other than the ective date is listed, the date must lays after the date of filing.)  REQUIRED SIGNATURE:   |  |
| EV: Effective date, if other than the ective date is listed, the date must lays after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a may are that any false information under the sum of the sum | be specific and cannot be more than five business da                           |

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

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