

# L11000038857

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**FLORIDA LIMITED LIABILITY CO.**  
**Greg Sharer Paint and Design, LLC**

Certificate of Status	0
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**ARTICLES OF ORGANIZATION  
OF  
Greg Sharer Paint and Design, LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: Greg Sharer Paint and Design, LLC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 444 York St, Gulf Breeze, Florida 32561.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**


The name and address of the initial registered agent is: Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717. Located in the County of Leon, Tallahassee, Florida 32301-2960.

**ARTICLE IV DURATION**

The duration for the limited liability company shall be: Perpetual.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the managing members and the name and address of the member of the Limited Liability Company is:  
Greg Sharer, 444 York St, Gulf Breeze, Florida 32561



Date: March 31, 2011

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717

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CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Greg Sharer Paint and Design, LLC

The name and address of the registered agent and office is Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:   
Mark Williams, A.V.P. Business Filings Incorporated

Date: March 31, 20

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