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EXAMINER



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TO ACKNOWLEDGE

PLYNOR OF CORPORATIONS

11 AUG 29 PH 1: 28

COVER LETTER

Division o	on Section f Corporations		
SUBJECT:	Deffers	on Painting ability Company	LLC
The enclosed Articl	es of Organization and fee(s) are subm	itted for filing.	
Please return all cor	respondence concerning this matter to	the following:	
- Salah Ingg	Larry Jeffe	rJOY e of Person	
	Larry Je	Fferson Pain	ting, LLC
210	5 Ridge top	Dn v O	
Ta	nahassee, Fr	32303 e and Zip Code	
	City/Stat	e and Zip Code	
	E-mail address: (to be used for fut	ure annual report notification)	
For further informat	tion concerning this matter, please call		
Larry J	effers on at (850 345 - M	
Enclosed is a chec	ck for the following amount:		
\$125.00 Filing Fee	Certificate of Status	Certified Copy Ce additional copy is enclosed) Ce	60.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)
	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 name of the Limited Liability Compan	y is:	
Anny Of Harson (Muss and with the words "Limited	Painting, LLC Liability Company, "L.I.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	,
2105 Ridgetop Drive Tallahassu, FL 32303	SAME	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Registered Agent. You must designate an indivi-	idual or another
The name and the Florida street address of	Vame	AUG 29 F
2105 Ridge- Florita stre	et address (P.O. Box <u>NOT</u> acceptable)	OF STA
Tallamasse	te, FL 32303	DE M

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 Meerl's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
mgrm.	Larry Jefferson 2105 Ridgetop Drive Tallahassee, FL 32303
(Use attachment if necessary)	
	ALL ALL COLLINS (ODTION
fective date is listed, the date mu	ist be specific and cannot be more than five business d
fective date is listed, the date mu days after the date of filing.)	ist be specific and cannot be more than five business d
fective date is listed, the date mu days after the date of filing.)	ist be specific and cannot be more than five business d
days after the date of filing.) REQUIRED SIGNATURE: Lewy	In the date of filing: (OPTION ist be specific and cannot be more than five business defined and cannot b

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)