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### Florida Department of State

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FLORIDA LIMITED LIABILITY CO. Johns Traditional Painting, LLC

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# Audit # H11000217030 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I

#### Name and Address

The name of this Limited Liability Company is:

Johns Traditional Painting, LLC

The mailing address and street address of the Limited Liability Company are:

6055 Elm Grove Ave., Unit 3 Jacksonville, FL 32244

## ARTICLE II Term of Existence

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

### ARTICLE III Purpose and Powers

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

#### **ARTICLE IV**

#### Powers

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at3812 W Linebaugh Ave., Suite 102, Tampa, FL 33618, 813-875-1333.

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#### Audit # H11000217030

## ARTICLE V Initial Registered Office and Agent

The street address of the initial registered office of this Limited Liability Company is:

6055 Elm Grove Ava., Unit 3 Jacksonville, FL 32244

and the name of its registered agent at such address is:

John Lowry

ARTICLE VI Management

This Limited Liability Company shall have One Manager(s) or Managing Member(s). The name and address of Manager(s) or Managing Member(s) are:

#### Name and Address

John Lowry, Managing Member 6055 Elm Grove Ave., Unit 3 Jacksonville, FL 32244

Dated: Thursday, September 01, 2011

John Lowry

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#### Audit # H11000217030

#### **ACCEPTANCE BY REGISTERED AGENT**

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.

Date: September 1, 2011

John Lowiv

SECRETARY OF STATE