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| (Requestor's Name) | | | | |
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| (Address) | | | | |
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| (Address) | | | | |
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| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
| - LEDG | | | | |
| L. SELLERS | | | | |
| OCT 15 2011 | | | | |
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Office Use Only



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COVER LETTER

| Division of Co | | | |
|----------------------------|---|---|--|
| subject: <u>RIC</u> | | STORATIONS, Liability Company | UC. |
| The enclosed Articles of | Organization and fee(s) are su | bmitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | RICHARD | C EATON ame of Person | |
| RICK | EATON RES | TORATIONS, | LLC |
| 35 | 50 ROS | LYN ROA | D |
| | VENICE | FL State and Zip Code | 34293 |
| | LEANFLWA | ATER® YA (future annual report notification) | 400. Com |
| For further information of | concerning this matter, please ca | all: | |
| RICK EA | 10N a | at (<u>941</u>) <u>223</u> Area Code & Daytime Teler | 785/ |
| _ | r the following amount: \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional 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 C Tallahassee, FL 32301 | ircle |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | | | | | | |
|--|---|------------------------------|------------------------------|---------------------|--|--|
| RICK EATON RESTOR (Must end with the words "Limited Liability C | Company, "L.L.C.," or LLC.") | | - | | | |
| ARTICLE II - Address: The mailing address and street address of the principal control of the pri | ipal office of the Limited Lial | oility C | Compa | ny is: | | |
| Principal Office Address: | Tailing Address: | | | | | |
| 3550 ROSLYN RD VENICE FL 34293 | 3550 ROSLYN VENICE FL 34 | RD 129. | <i>3</i> | | | |
| ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.) | | | | | | |
| The name and the Florida street address of the regis | stered agent are: | | | | | |
| RICHARD C EATON | | | | | | |
| Name 2 C C O C O C O C O C O C O C O C O C O | | | | | | |
| Florida street address (P.O. Box NOT acceptable) | | | | | | |
| VENICE FI | 34293 | | | | | |
| Having been named as registered agent and to accelliability company at the place designated in this cregistered agent and agree to act in this capacity. I statutes relating to the proper and complete perfor accept the obligations of my position as registered. | certificate, I hereby accept the further agree to comply with the mance of my duties, and I am led agent as provided for in Cha | appoir he prov familia | ntment visions ur with | as of all and | | |
| 11.009 | 7 | | | | | |
| Registered Agent's Signature (| (REQUIRED) | | 13.0CT | v v | | |
| (CONTINUE) | D) | | <u>ီ</u> | ्याच्याक श्री | | |
| Page 1 of 2 | | Tripp Tri | AHI | | | |

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| <u>Title:</u> "MGR" = Manager | Name and Address: |
|---|--|
| "MGRM" = Managing Member | |
| MBR | RICHARD C EATON 3550 ROSLYN RD VENICE FL 34293 |
| | |
| | |
| | |
| (Use attachment if necessary) | |
| ARTICLE V: Effective date, if other than the lift an effective date is listed, the date must be or 90 days after the date of filing.) | e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior |
| REQUIRED SIGNATURE: | 1,09 |

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

LADA A TATOM

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)

Date of this notice: 09-30-2011

Employer Identification Number:

45-3477048

Form: SS-4

Number of this notice: CP 575 G

RICK EATON RESTORATIONS LLC RICHARD C EATON SOLE MBR 3550 ROSLYN RD VENICE, FL 34293

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 45-3477048. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub. Thank you for your cooperation.