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PICK-UP	WAIT	MAIL	
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Pertified Copies	_ Certificates	of Status	_
Special Instructions to	Filing Officer:		$\exists \mid$

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COVER LETTER

TO: Registration Division of C	n Section Corporations	
SUBJECT: Paul	Stokes Builder	
Sobsect.	 	ed Liability Company
The enclosed Articles	of Organization and fee(s) are	submitted for filing.
Please return all corre	espondence concerning this mat	ter to the following:
Curtis P	aul Stokes	
		Name of Person
Paul Sto	okes Builder	
		Firm/Company
15225 N	IW Williams Road	
		Address
Altha, Flo	rida 32421	
	Cit	y/State and Zip Code
sand_105	5@yahoo.com	
	E-mail address: (to be used t	for future annual report notification)
For further informatio	on concerning this matter, please	e call:
Paul Stokes		at (850) 762-2530
'Nam	ne of Person	Area Code & Daytime Telephone Number
Enclosed is a check	for the following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 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 Circle Tallahassee, FL 32301

The second secon

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:	
Paul Stokes Builder, 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	ne principal office of the Limited Liab	oility Company is:
Principal Office Address:	Mailing Address:	
15225 NW Williams Road Altha, Florida 32421	P.O. Box 829 Blountstown, Florida 32424	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Curtis Paul Stokes	Registered Agent. You must designate an individu	
15225 NW Wil	liams Road	14 ARY
	et address (P.O. Box <u>NOT</u> acceptable)	THE PER
Altha,	FL 32421 ry, State, and Zip	+: 06 STATE LORID
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as Registered Agent's S	d in this certificate; I hereby accept the coacity. I further agree to comply with the terformance of my duties, and I am f	bove stated limited appointment as he provisions of all familiar with and

(CONTINUED)

Page 1 of 2

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

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

MGR	Curtis Paul Stokes
· · · · · · · · · · · · · · · · · · ·	P.O. Box 829
	Blountstown, FL 32424
(Use attachment if necessary)	
LE V: Effective date, if other than the	ne date of filing: (OPTIO
fective date is listed, the date must	be specific and cannot be more than five business

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.)

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)