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# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : BLANCO ACCOUNTING I, INC.

Account Number : I20100000060

Phone

: (305)828-1148

Fax Number

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## FLORIDA LIMITED LIABILITY CO. W & J Painting LLC

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Certificate of Status	0
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Page Count	01
Estimated Charge	\$125.00

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APR **1 0** 2012

Saturday, April 07, 2012

To Whom It May Concern:

I, Wilson A Hurtado, President W & J Painting LLC. have no intention of reinstating the mentioned corporation therefore; I release the name for to another entity.

Should you need additional information, please do not hesitate to inform me.

Wilson A Hurtado

Sworn to and subscribed before me this 04/07/2012

Notary at Lar



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: W & J Painting 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 principal office of the Limited Liability Company is: **Principal Office Address: Mailing Address:** 13839 SW 157 TERRACE 13839 SW 157 TERRACE MIAMI FL 33177 **MIAMI FL 33177** ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: WILSON A HURTADO Name 13839 SW 157 TERRACE Florida street address (P.O. Box NOT acceptable) MIAMI FL 33177 City, State, and Zip 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 pasition as idgistered agent as provided for in Chapter 608, F.S.,

Signature (REQUIRED)

(CONTINUED)

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

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

"MGR" = Manager "MGRM" = Managing Member	15
MGR	WILSON HURTADO 13839 SW 157 TERRACE MIAMI FL 33177
(Use attachment if necessary)	
	ne date of filing:
REQUIRED SIGNATURE:	Al 1

Signature of a member or on containing descentative 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.)

#### **WILSON A HURTADO**

Typed or printed name of signee

#### 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)

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