L12000051876

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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2 APR 16 PM 12: 30

C. LEWIS

APR 1 7 2012

EXAMINER

COVER LETTER

17

TO: Registration of Division of Control of C	on Section f Corporations	•	
SUBJECT: J.A.	.M. Painting LLC Name of Limi	ted Liability Company	
The enclosed Article	es of Organization and fee(s) are	submitted for filing.	
Please return all cor	respondence concerning this mat	ter to the following:	
Joseph	A. Mahoney		
		Name of Person	
J.A.M.	Painting LLC		
- 		Firm/Company	
16750	Richloam Lane		
 		Address	
Spring H	ill, FL 34610		
	Ci	y/State and Zip Code	
joseph.m	ahoney@ymail.com		
		for future annual report notification)	
For further informat	ion concerning this matter, pleas	e call:	
Joseph A. Ma	honey	at (352) 340-9559	
Na	me of Person	Area Code & Daytime Telephone Number	_
Enclosed is a check	k for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Certified Copy Certificate of St (additional copy is enclosed) Certified Copy (additional copy is	tatus &
	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

J.A.M. Pai	<u> </u>		
1	(Must end with the words "Limit	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II -	Address:		
		f the principal office of the Limited Liab	oility Company is:
Principal Office Address:		Mailing Address:	
16750 Richloam Lane		16750 Richloam Lane	
Spring Hill, FL 34610		Spring Hill, FL 34610	
			
ARTICLE III -	Dogistared Agent Dog	Para LORD OT TA TA 41 (Di 4
(The Limited Liability business entity with	y Company cannot serve as its ov an active Florida registration.) ne Florida street address o	istered Office, & Registered Agent's S wn Registered Agent. You must designate an individu of the registered agent are:	ual or another
(The Limited Liability business entity with	y Company cannot serve as its ov an active Florida registration.)	wn Registered Agent. You must designate an individuon of the registered agent are:	ual or another
(The Limited Liability business entity with	y Company cannot serve as its ov an active Florida registration.) ne Florida street address o	wn Registered Agent. You must designate an individuon of the registered agent are: Ney Name	ual or another
(The Limited Liability business entity with	y Company cannot serve as its or an active Florida registration.) The Florida street address of Joseph A. Mahor 16750 Richlo	wn Registered Agent. You must designate an individuon of the registered agent are: Ney Name	ual or another
(The Limited Liability business entity with	y Company cannot serve as its or an active Florida registration.) The Florida street address of Joseph A. Mahor 16750 Richlo	of the registered agent are: ney Name am Lane treet address (P.O. Box NOT acceptable)	ual or another
(The Limited Liability business entity with	Joseph A. Mahor 16750 Richlo Florida string Hill,	of the registered agent are: ney Name Name	12 APR 16 PM 12: 30 12 APR 16 PM 12: 30 TALLAHASSEE, FLORIDA

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): FILED The name and address of each Manager or Managing Member is as follows: 12 APR 16 PM 12: 30 Name and Address: Title: SECRETARY OF STATE TALLAHASSEE, FLORIDA "MGR" = Manager "MGRM" = Managing Member MGR Joseph A. Mahoney 16750 Richloam Lane Spring Hill, FL 34610 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: April 9, 2012 . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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.)

Joseph A. Mahoney

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)