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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

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Account Number : I20070000160
Phone : (800) 494-3124
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****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

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FLORIDA LIMITED LIABILITY CO.

Sure Corners Renovations, LLC

Certificate of Status	0
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J. BRYAN

AUG 21 2012

EXAMINER

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

FILED
2012 AUG 20 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the Limited Liability Company is:

SURE CORNERS RENOVATIONS, LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

1737 SETTING SUN LOOP
CASSELBERRY, FLORIDA 32707

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:

MICHAEL ALLMAN
1737 SETTING SUN LOOP
CASSELBERRY, FLORIDA 32707

Having been named as registered agent 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 as provided for in Chapter 608, F.S.

X Michael Allman
MICHAEL ALLMAN / Registered Agent's signature

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PAGE 2 SURE CORNERS RENOVATIONS, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS

MANAGING MEMBER

MICHAEL ALLMAN

1737 SETTING SUN LOOP

CASSELBERRY, FLORIDA 32707

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

.....

X

Michael Allman
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.

MICHAEL ALLMAN

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