

**L2000115061**

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

**From:**  
Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

**\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

**Email Address:** \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.**

**Sawgrass Custom Painting LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 03       |
| Estimated Charge      | \$125.00 |

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

In compliance with Chapter 608, F.S.

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**ARTICLE I NAME**

The name of the Limited Liability Company is:

SAWGRASS CUSTOM PAINTING LLC

**ARTICLE II ADDRESS**

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

1203 TYLER STREET  
HOLLYWOOD, FLORIDA 33019

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

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

JOSEPH IMPALLOMENI  
1203 TYLER STREET  
HOLLYWOOD, FLORIDA 33019

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 Joseph Impallomeni  
JOSEPH IMPALLOMENI / Registered Agent's signature

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**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

JOSEPH IMPALLOMENI

1203 TYLER STREET

HOLLYWOOD, FLORIDA 33019

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

x Joseph Impallomeni

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.

JOSEPH IMPALLOMENI

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