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PICK-UP	WAIT MAIL
(Busi	ness Entity Name)
(Docu	ument Number)
Certified Copies	Certificates of Status
Special Instructions to Fi	ling Officer:
·	ling Officer: W12-J460d
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Office Use Only

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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 4, 2012

MICHAEL SHAHEEN P.O. BOX 3461 LAKE CITY, FL 32056

SUBJECT: ALLCOAT LLC. Ref. Number: W12000024602

We have received your document for ALLCOAT LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is K02484.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

www.sunbiz.org

Letter Number: 412A00013391

COVER LETTER	
TO: Registration Section Division of Corporations	
ALLCOAT PROS LLC.	
Name of Limited Liability Company	•
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
MICHAEL SHAHEEN	
Name of Person	
ALLCOAT PROS LLC.	For 6
Firm/Company	
PO BOX 3461	D
Address	<u>(S)</u> 73 €
LAKE CITY, FL 32056	
City. State and Ztp Code	9₹ ₹
allcoatpaint@gmail.com E-mail address: (to be used for future nanual report notification)	<u> </u>
For further information concerning this matter, please call:	
MICHAEL SHAHEEN 386 754-1486	
Name of Person Area Code & Daytime Telephone Number	- 1
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee \$\delta \\$ Certificate of Status \$\text{Certified Copy} \\ \text{(additional copy is enclosed)} \$\text{(additional copy is enclosed)} \$(addit	atus &

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 Tailahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ALLCOAT PROSILIC.	
(Must end with the wo	s "Limited Unbility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street ac	ress of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2405 SW Little Rd.	PO Box 3461
	F O DOX 0701
ARTICLE III - Registered Age (The Limited Liability Company cannot ser business entity with an active Florida regis	Lake City, Ft 32056
ARTICLE III - Registered Age (The Limited Liability Company cannot ser business entity with an active Florida regis	Lake City, Ft 32056
(The Limited Liability Company cannot ser business entity with an active Florida regi- The name and the Florida street	t, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another ation.) idress of the registered agent are:
ARTICLE III - Registered Age (The Limited Liability Company cannot ser business entity with an active Florida regis The name and the Florida street	Lake City, Ft 32056 t, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another ation.) Idress of the registered agent are:
ARTICLE III - Registered Age (The Limited Liability Company cannot ser business entity with an active Florida regis The name and the Florida street Michael Shahee	t, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another ation.) iddress of the registered agent are:
ARTICLE III - Registered Age (The Limited Liability Company cannot ser business entity with an active Florida regis The name and the Florida street Michael Shahee	Lake City, Fl 32056 t, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another ation.) Idress of the registered agent are:

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

MCD	t e t 🔐
MGR	Michael Shaheen
 	PO Box 3461
	Lake City, FI 32056
	البارة.
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	<u> </u>

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/TT	. \
(Use attachment if necessar	ry)
	con then the date of filing:
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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)

Michael Shaheen

Typed or printed name of signee