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COVER LETTER

•			
TO: Registration Sec Division of Corp			
SUBJECT: Top	Notch Pointin	d Liability Company	
The enclosed Articles of C	· Organization and fee(s) are s	ubmitted for filing.	
Please return all correspon	ndence concerning this matte	r to the following:	٠
Thom	as Chase L	Anwey Name of Person	
	op Notch Pa	inting/mainten	ance
7	09 1st Street	Address	·
	vana, PL. 323	/State and Zip Code	·
	E-mail address: (to be used for	or future annual report notification)	
Chase (Cyrulay Person	at (<u>850</u>) <u>212-36</u> Area Code & Daytime Telep	
Enclosed is a check for	the following amount:		
S125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	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 C Tallahassee, FL 32301	MISSEE TH

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABIEITY COMPANY					
ARTICLE I - Name: The name of the Limited Liability Company is:					
Top Notch Painting/maintenance (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 pri	ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
Tog 1st Street Havara, Fc. 22333	<u>Same</u>				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ered Agent. You must designate an individual or another				
The name and the Florida street address of the re					
Thomas Chase Name	<u>Canway</u>				
709 1st Street	o sl				
	ress (P.O. Box NOT acceptable)				
Litarana City, Sta	FL 32333 nte, and Zip				
liability company at the place designated in the registered agent and agree to act in this capacall statutes relating to the proper and complete	accept service of process for the above stated limited his certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of e performance of my duties, and I am familiar with gistered agent as provided for in Chapter 608, F.S				
Registered Agent's Signat	(PEOLIBED)				
Registered Agent's Signat	me (KEQOIKED)				

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
"MGR"	Thomas Lanway 709 1st Street Havana FL 32333
	·
(Use attachment if necessary)	,
CLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.)	e date of filing: (OPTIONAL) t be specific and cannot be more than five business

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.)

Thomas Chase Lanuay
Typed or printed name of signed

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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