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(Re	equestor's Name)	-
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PICK-UP	☐ WAIT	MAIL
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(850) 245-6051.

COVER LETTER

TO:

Registration Section **Division of Corporations**

The Avalon Painter and Handyman

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all corresp	ondence concerning this matt	er to the following:		
Richard	l Falzone			
		Name of Person		
The Ava	alon Painter			
		Firm/Company		
130 <u>0</u> 0 l	Lake Live Oal	k Drive		
		Address		
Orlando	o, Florida 328			
		y/State and Zip Code		
Avalonpai	nter@yahoo.com E-mail address: (to be used	for future annual manast no	tification)	
	·	•	(incation)	
For further information	concerning this matter, please	e call:		
Rich Falzo	ne	_at (609) 4	68-89	95
Name	of Person	Area Code & D	aytime Telep	hone Number
Enclosed is a check for	or the following amount:			
□\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fe Certified Copy (additional copy is e		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courie		

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Comp	pany is:	
The Avalon Painter and Handyman, LLC		
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	of the principal office of the Limited Liabi	lity Company is:
Principal Office Address:	Mailing Address:	•
13000 Lake Live Oak Drive	13000 Lake Live Oak Drive	
Orlando, FL 32828	Orlando, FL 32828	
business entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an individual of the registered agent are:	SLANE FEB. 18
Richard Falzone	Name	57. 6
	Name	<u> </u>
13000 Lake Live Oak Drive, Orlando, FL 32828		mc Z
Florida street address (P.O. Box NOT acceptable)		
	FL	53 104 105 105 105
	FL City, State, and Zip	•
liability company at the place design registered agent and agree to act in thi all statutes relating to the proper and	and to accept service of process for the about ated in this certificate, I hereby accept the cois capacity. I further agree to comply with a complete performance of my duties, and I do not as registered agent as provided for in C.	appointment as the provisions of um familiar with

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGR	Richard Falzone	
•	13000 Lake Live Oak Drive	
	Orlando, FL 32828	
	-187/1/11	
		
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the	e date of filing: (OPTIONAL)	
(If an effective date is listed, the date must	t be specific and cannot be more than five business day	ys
prior to or 90 days after the date of filing.)		
	A A A A A A A A A A A A A A A A A A A	
REQUIRED SIGNATURE:	Allassee	
Signature of a membe	er or an authorized representative of a member.	
constitutes an affirmation under I am aware that any false inform	s the penalties of perium that the feets stated begin are true	?: 5 3
Richard Falzone		
Ту	ped 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)