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SUBJEC'	r: All in	One Windows and						
		Nan	ne of Lin	nited Liabi	lity Compan	У		
The enclose	sed Articles o	of Organization and	fce(s) ar	e submitte	d for filing.			
Please ret	um all corres	pondence concernir	ng this ma	atter to the	following:			
	1	Mandy Wymer						
				Name o	f Person			
		All in One Window	s and Do	ors Instal	ation and Se	rvice LI	.C.	
				Firm/C	ompany			
	4409 N	AcIntosh Park Drive	e Apt#20	5				
				Add	ress			
	'Sarasota I	FL. 34232						
			С	ity/State a	nd Zip Code			
	mandywy	mer68@gmail.com	<u>n</u>	16 6		- . . . 	4:>	
		E-mail address: (to be used	a for futur	e annuai repo	ort notifica	uon)	
For furthe	r information	concerning this ma	atter, plea	ise call:				
Mandy	Wymer		at (941) 223-91	20		
		e of Person		Area Co			ephone Number	r
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Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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 Company is:		
All in One Windows and Doors Installation a	•	
(Must end with the words "Lim	nited Liability Company, "L.L.C.," or "LLC."	")
ARTICLE II - Address:		
The mailing address and street address of the princip	pal office of the Limited Liability Company i	s:
Principal Office Address:	Mailing Address:	
4409 McIntosh Park Drive Apt. 205	4409 McIntosh Park Drive Apt. 20	05
Sarasota, FL 34232	Sarasota, Fl 34232	
	· · ·	
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its another business entity with an active Florida registr	own Registered Agent. You must designate a	in individual or
The name and the Florida street address of the regist	tered agent are:	28 F
CHAY HELMUTT	4 P.S.A. PROI ALARY	
		· · · · · · · · · · · · · · · · · · ·
3626 WILKIN	P7 6021	- 141 - 1735 - 171 4 - 1775
Florida street address (P.O.	Box NOT acceptable)	
SARASOTA	FL 34233	
City	Zip	Ö∷ Ö ≯

Having been named as registered agent and 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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u> Title:</u>	Name and Address:
'AMBR" = Authorized Member	
MGR" = Manager	
AMBR	Mandy Wymer
	4409 McIntosh Park Drive Apt. 205
	Sarasota, FL 34232
MGR	Bryan Wymer
- MOIC	4409 McIntosh Park Drive Apt. 205
	Sarasota, FL 34232
ctive date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 96
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Page 2 of 2