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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 10, 2014

JOHN MACPHERSON PO BOX 7076 PANAMA CITY BEACH, FL 32413

SUBJECT: JMAC PROFESSIONAL PAINT CO LLC

Ref. Number: W14000035922

We have received your document for JMAC PROFESSIONAL PAINT CO 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):

Limited Liability Companies are not corporations. Limited Liability Companies are unique business entities with special characteristics and attributes formed under Chapter 605, Florida Statutes. Corporations, on the other hand, are formed under Chapter 607, Florida Statutes, and possess other distinctive traits and characteristics. Consequently, limited liability company documents cannot contain any references/terms which may implicate the entity is a corporation. Please delete any references to the term "corporation" or the like from your document.

Please return the corrected original and one copy of 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) 245-6051.

Letter Number: 814A00012461

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

| TO: Registration Sec Division of Corp | | | |
|------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| SUBJECT: Jmac Profe | | nited Liability Company | <u> </u> |
| The enclosed Articles of C | rganization and fee(s) ar | e submitted for filing. | |
| Please return all correspon | dence concerning this ma | atter to the following: | |
| John P. Mac | Pherson | Name of Person | |
| <u>Jmac Profes</u> | sional Paint co. | Firm/Company | |
| <u>P. O. Box 70</u> | 76 16409 East Lullwat | er Dr. Address | |
| <u>Panama City</u> | Beach, Fl 32413 | ity/State and Zip Code | |
| steepleiackjohn@ho E | otmail.com -mail address: (to be used | I for future annual report notifica | tion) |
| For further information con | neerning this matter, plea | se cail: | |
| John P. MacPherson Name of | | Area Code Daytime Tel | ephone Number |
| Enclosed is a check for the | following amount: \$130.00 Filing Fee & Certificate of Status | S155.00 Filing Fee & Certified Copy (additional copy is enclosed) | S160.00 Filing—Fee. Certificate of Status &— Certified Copy (additional copy is enclosed) |
| Registrat Division P.O. Box | Address tion Section of Corporations x 6327 see, FL 32314 | Street/Courier Adda Registration Section Division of Corporate Clifton Building 2661 Executive Cent Tallahassee, FL 3230 | ions S S |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The name of the Limited Liability Company is: | |
| JMAC Professional Paint & LLC | |
| (Must end with the words "Limited L | ciability Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the principal offi | ice of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 16409 E, Lullwater Dr | P. O. Box 7076 |
| Panama City Beach, Fl 32413 | Panama City Beach, Fl 32413 |
| ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.) The name and the Florida street address of the registration. | legistered Agent. You must designate an individual or) |
| The name and the Florida street address of the registered a | gent are: |
| John P. MacPherson Name | |
| 16409 E. Lullwater Dr. | |
| Florida street address (P.O. Box 1 | NOT acceptable) |
| Panama City Beach | FL 32413 |
| City | Zip |
| the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig | ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r605, F.S. |
| John P. Man | Pherson |
| Registered Agent's Signatur | re (REQUIRED) |
| (CONTINUE) | D) 5 |
| Page 1 of 2 | |

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ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company:

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------|
| "MGR" = Manager MGR | John P. MacPherson 16409 E. Lullwater Dr. Panama City Beach, Fl 32413 | | _ |
| - | Fallania City Deach, F1 32413 | | |
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| fective date is listed, the date must be specific | iling: (OPI | IONAL) s prior to or | 9 0 day |
| Use attachment if necessary) LE V: Effective date, if other than the date of fifective date is listed, the date must be specific of filing.) LE VI: Other provisions, if any. | c and cannot be more than five business days | 'IONAL) s prior to or | 90 da |
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| LE V: Effective date, if other than the date of fifective date is listed, the date must be specific of filing.) LE VI: Other provisions, if any. REOUIRED SIGNATURE: | Mulheror | s prior to or | 90 da |
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