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T. HAMPTON

COVER LETTER

	Registration Division of C	Section orporations			
SUBJEC	T: Fran	cis Painting and Pressu	re Washing, L	LC	
50000	••	Name of Lin	nited Liability C	ompany	
The enclo	sed Articles	of Organization and fee(s) ar	e submitted for f	iling.	
Please ret	urn all corres	pondence concerning this m	atter to the follow	ving:	
	Brando	on Francis			
			Name of Pers	on	
	From	ves Painting ai	Ad Pressi Firm/Compan	ny	
	2397 Sar	dpiper St			
			Address		
	Tallahas	ssee FL 32301			
	b.lo2231@	yahoo.com	City/State and Zip	Code	
		E-mail address: (to be use	d for future annu	al report notifica	tion)
For further	er information	concerning this matter, plea	ise call:		
Brando	n Francis	at (850	728-0124	
	Nan	ne of Person	Area Code	Daytime Tel	lephone Number
Enclosed	is a check for	r the following amount:			
Š \$125.00)	Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fit Certified Co (additional co	_	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Reg Divi P.O.	ling Address stration Section sion of Corporations Box 6327 phassee, FL 32314	Reg Divi Clift	et/Courier Addristration Section ision of Corporation Building I Executive Cent	ions

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lia	bility Company is:			
Francis Painting and P	ressure Washing, LLC			
(Must o	end with the words "Limite	d Liability Co	ompany, "L.L.C.,	or "LLC.")
ARTICLE II - Address: The mailing address and stre	et address of the principal	office of the I	Limited Liability (Company is:
Principal Office Address:		Mailing	Address:	
2397 Sandpiper St, Tall	ahassee FL 32301	2397 Sandpiper St, Tallahassee Fl 32301		
ARTICLE III - Registered (The Limited Liability Companother business entity with	any cannot serve as its ow	n Registered.		
The name and the Florida str Bra	eet address of the registere ndon Francis	ed agent are:		
239	Nar 77 Sandpiper St	ne		-
Flo	rida street address (P.O. B	ox <u>NOT</u> acce	ptable)	-
Tal	lahassee	FL	32301	
	City		Zip	_
the place designated in t capacity. I further agree t	his certificate, I hereby acc o comply with the provision miliar with and accept the c	ept the appoints of all statute obligations of appendix, F.S. nature (REQU	ntment as registerd es relating to the p my position as reg 	stated limited liability company of ed agent and agree to act in this proper and complete performance gistered agent as provided for in

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager Member	Brandon Francis		
	2397 Sandpiper St, Tallahassee FL 32301		
(Use attachment if necessary)			
LE V: Effective date, if other than the date of filing	(OPTIONAL)		
ffective date is listed, the date must be specific and e of filing.)	d cannot be more than five business days prior to or 90 da		
LE VI: Other provisions, if any.			

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjudy 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.)

Brandon Francis

Typed 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)