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(Re	equestor's Name)	
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		CO	VER LETT	ER	***
	egistration S ivision of Co				
SUBJECT	Rolon Pai	nting LLC			
SUBJECT	·	Name of Lin	nited Liabilit	y Company	
The enclose	ed Articles o	f Organization and fee(s) are	e submitted t	or filing.	
Please retu	rn all corresp	ondence concerning this ma	itter to the fo	llowing:	
	Riscardo Ro	olon Pena			
			Name of I	Person	
	Rolon Paint	ing LLC			
			Firm/Con	npany	
	4316 Walbr	ridge Street			
			Addre	SS	
	Orlando, FI	. 32809			
	<u> </u>		ity/State and	Zip Code	
_		@hotmail.com	£ £-4		
		E-mail address: (to be used	for future ar	inuai report nottiicatic)II)
For further in	nformation co	oncerning this matter, please	e call:		
	Riscardo Ro	olon 40 at ()7	715-4758	
	Nar	me of Person A	rea Code	Daytime Telephone	Number
Enclosed is	a check for	the following amount:			
\$125.00 Fi	ling Fee	\$130.00 Filing Fee & Certificate of Status	Certifie) Filing Fee & d Copy l copy is enclosed)	\$160.00 Filing Fec, Certificate of Status & Certified Copy

Mailing Address

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

Street Address

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Rolon Painting L. (Must e	nd with the words "Limited	d Liability Company, '	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and stree	et address of the principal o	office of the Limited L	iability Company is:		
<u>Prin</u>	cipal Office Address:		Mailing Addres	<u>ss</u> :	
4316 Walbridge S			Walbridge Street		
Orlando, FL 3280	99	Orland	do, FL 32809		
ARTICLE III - Registered				 	
(The Limited Liability Companion another business entity with a	any cannot serve as its own an active Florida registration	n Registered Agent. Yo on.)		vidual or	\$114 12
(The Limited Liability Compa	any cannot serve as its own an active Florida registration	n Registered Agent. Yo on.)		المنظمة المنظم المنظمة المنظمة المنظم	67* q 3 g
(The Limited Liability Companion another business entity with a	any cannot serve as its own an active Florida registration	n Registered Agent. Yo on.) d agent are:		المنظمة المنظم المنظمة المنظمة المنظم	arry way
(The Limited Liability Companion another business entity with a	any cannot serve as its own an active Florida registration eet address of the registered	n Registered Agent. Yo on.) d agent are:		TALLAHASSES	Z († 10. rowen 15. december
(The Limited Liability Companion another business entity with a	any cannot serve as its own an active Florida registration eet address of the registered	n Registered Agent. Younneld agent are: a Name		TALLAHASSEE, FI	2 ∏ 10 masteri
(The Limited Liability Companion another business entity with a	any cannot serve as its own an active Florida registration and active Florida registered address of the registered Riscardo Rolon Pena 4316 Walbridge Street	n Registered Agent. Younneld agent are: a Name	ou must designate an indi	TALLAHASSEE, FI	2 1
(The Limited Liability Companion another business entity with a	any cannot serve as its own an active Florida registration and active Florida registered address of the registered Riscardo Rolon Pena 4316 Walbridge Street	n Registered Agent. Yoon.) d agent are: a Name	ou must designate an indi	TALLAHASSES	E (E No realism No designate

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)

Page 1 of 2

(CONTINUED)

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager	Riscard Rolon Pena		
MGR	4316 Walbridge Street		-
			-
	Orlando, FL 32809		-
AMBR	Carol Mujica		
	4316 Walbridge Street		-
	Orlando, FL 32809		רט ד
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effective date is listed, the date must b	date of filing:	TIONAL)	- Ö
CLE V: Effective date, if other than the effective date is listed, the date must bute of filing.)	ne specific and cannot be more than five business day not meet the applicable statutory filing requirements, the	s prior to or 9	_ (35)
CLE V: Effective date, if other than the effective date is listed, the date must be te of filing.) If the date inserted in this block does	ne specific and cannot be more than five business day not meet the applicable statutory filing requirements, the	s prior to or 9	_ (35)
CLE V: Effective date, if other than the effective date is listed, the date must be to of filing.) If the date inserted in this block does becoment's effective date on the Departre CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of	ne specific and cannot be more than five business day not meet the applicable statutory filing requirements, the	s prior to or 9 his date will n	0 day

ARTICLE IV-

Page 2 of 2

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)