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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Zeller Parting LU Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person
Zeller Painting LLC Firm/Company
1503 DAVIS Drive
Tallahassee Fl. 32315
City/State and Zip Code Zelle-Pr., Joy (L.C. All Cower Care " E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rick Zeller at (850) 408-8663 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address

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

Street Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:			
•	eller Pajutin	c 110		
(Must end w	ith the words "Limited Li	ability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	dress of the principal offic	ce of the Limited	Liability Company is:	
<u>Principa</u>	l Office Address:		Mailing Addres	<u>ss</u> :
1503 Davis C	Tive			
Talulussee	FL 32315			<u></u>
(The Limited Liability Company of another business entity with an act.) The name and the Florida street and the F	ctive Florida registration.)	gent are:		vidual of
	1503 Davis	Drive		•
	Florida street address (I		cceptable)	
,	TA llabasses	· FL	323/5	
	City	State	Zip	
Having been named as registered a place designated in this certificate, further agree to comply with the pro am familiar with and accept the obl	I heroby accept the appoint visions of all statutes relating ations of the position as	nument as registero uting to the proper registered agent t	ed agent and agree to act in and complete performance	this capacity. I of my duties, and I

(CONTINUED)

Page 1 of 2



"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
Ambe	Richard L Zeller 1503 Davis prive Fallahlassee FL 32315
<u>·</u>	
,	
(Use attachment if necessary)	•
CLE V: Effective date, if other than the date	of filing: (OPTIONAL)
ffective date is listed, the date must be sp e of filing.) If the date inserted in this block does not n	ecific and cannot be more than five business days prior to or 90 deneet the applicable statutory filing requirements, this date will not be
ffective date is listed, the date must be spe of filing.) If the date inserted in this block does not nument's effective date on the Department	ecific and cannot be more than five business days prior to or 90 deneet the applicable statutory filing requirements, this date will not be
ffective date is listed, the date must be spe of filing.) If the date inserted in this block does not nument's effective date on the Department	ecific and cannot be more than five business days prior to or 90 deneet the applicable statutory filing requirements, this date will not be
ffective date is listed, the date must be sp e of filing.)	ecific and cannot be more than five business days prior to or 90 deneet the applicable statutory filing requirements, this date will not be
ffective date is listed, the date must be specifiling.) If the date inserted in this block does not rument's effective date on the Department LE VI: Other provisions, if any. Signature of a mathematical mathema	ecific and cannot be more than five business days prior to or 90 defineet the applicable statutory filing requirements, this date will not be of State's records. The ember of an authorized representative of a member and accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State in felony as provided for in s.817.155, F.S.

ARTICLE IV-