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## COVER LETTER

TO:	Registration Section Division of Corporations	<b>*</b> *
SUBJE	CCT: ALL Americ Name of	an Trim and Painting, LLC Limited Liability Company
The en	closed Articles of Organization and fee(s	s) are submitted for filing.
Please	return all correspondence concerning thi	s matter to the following:
	Steve W	Name of Person
	ALL America	an Trim and Painting, LLC. Firm/Company
	171 Triple	
	Cusselberry  AAtrimand  E-mail address: (to be a	1, Floricla 32707  City/State and Zip Code  Painting @ gmail. Com  used for future annual report hotofication)
For furth	er information concerning this matter, pl	M
•	Steve Wilkenson Name of Person	Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:	
\$125.0	0 Filing Fee \$\\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327	Street Address  New Filing Section  Division of Corporations  Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:			
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(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

## **ARTICLE II - Address:**

**ARTICLE 1 - Name:** 

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
171 Triplet Drive	171 Triplet Drive
32765	32765

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Steve Wilkenson

Name

171 Triplet Drive

Florida street address (P.O. Box NOT acceptable)

Cusselberry, Florida 32765

City State Zip

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

SeContract State of Secondary Second

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Steve Wilkenson 171 Triplet Drive
AMBR_	David Ackley 171 TripleT Drive Casselberry, Fl 32765
Use attachment if necessary)	
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