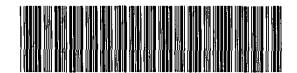
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Hellenic Paints & Coatings LLC 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:
Phillip S. Patits 45 Name of Person
Hellenic Paints & Coatings LLC Firm/Company
Firm/Company
P.O. Box 990699, 11665 Collier Blvd
Addless
Naples, FL 34116-9998 City/State and Zip Code
Phillip. Patits as @ gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Phillip Patits 95 at 239 963-7558 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section New Filing Section

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Hellenic Paints & Coatings LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1220 31 St Street Naples, FL 3411	5W P.O. Box 990699 7 11665 Collier Blvd Naples, FL 34/16-9998
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own another business entity with an active Florida registral	vn Registered Agent. You must designate an individual or
The name and the Florida street address of the register	
Phi/	lip S. Patitsas Name 31st Street SW
	'Name
1220	31st Street SW
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Napl	es FL 341/7
City 1	State Zip
place designated in this certificate, I hereby accept the apfurther agree to comply with the provisions of all statutes am familiar with and accept the obligations of my position.	rvice of process for the above stated limited liability company at the pointment as registered agent and agree to act in this capacity. I relating to the proper and complete performance of my duties, and in as registered agent as provided for in Chapter 605, F.S
Regi	stered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

16 NOV 18 PM 12: 41

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
<u>AMBR</u>	Phillip S. Patitsas 1220 31st Street SW
<u>AMBR</u>	Maria B. Patitsas 1220 31st Street SW Naples, FL 34117
(Hea attachment if passesson)	
ective date is listed, the date must be	ate of filing: <u>January 1, 2017</u> . (OPTIONAL) specific and cannot be more than five business days prior to or 90 da
EV: Effective date, if other than the date is listed, the date must be of filing.)	specific and cannot be more than five business days prior to or 90 da of meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the date dective date is listed, the date must be of filing.) If the date inserted in this block does no ment's effective date on the Departme	specific and cannot be more than five business days prior to or 90 da of meet the applicable statutory filing requirements, this date will not be
E V: Effective date, if other than the datective date is listed, the date must be of filing.) The date inserted in this block does no ment's effective date on the Department. E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a This document is exert am aware that any faconstitutes a third deg	specific and cannot be more than five business days prior to or 90 da of meet the applicable statutory filing requirements, this date will not be

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ARTICLE IV-