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COVER LETTER

	ew Filing Section ivision of Corporations
SHERECT	Gordon Renfro's Repairs, LLC
SUBJECT	Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	Gordon Renfro
	Name of Person
	Firm/Company
	1009 Morgan Avenue
	Address
	Chattahoochee, FL 32324
	City/State and Zip Code renfro_6680@yahoo.com
-	E-mail address: (to be used for future annual report notification)
or further in	nformation concerning this matter, please call:
	Gordon Refro 850 212-4231
	Name of Person Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:
\$ 125.00 Fi	ling Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \ \text{Certified Copy (additional copy is enclosed)} \ Certified Copy (additional copy
	Mailing Address Street Address

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

ARTICLE I - Name:			
The name of the Limited Liability	Company is:		
Gordon Renfro's R	epairs, LLC		
(Must conta	in the words "Limited	Liability Compar	ay, "L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street ad-	dress of the principal of	office of the Limit	ed Liability Company is:
<u>Principa</u>	l Office Address:		Mailing Address:
1009 Morgan Avenue			1009 Morgan Avenue
Chattahoochee, FL 3232	24		Chattahoochee, FL 32324
ARTICLE III - Registered Ages (The Limited Liability Company of another business entity with an ac	cannot serve as its own	Registered Ager	it. You must designate an individual or
The name and the Florida street ac	ddress of the registered	dagent are:	
	Gordon Re	nfro	
		Name	
	1009 Morgan Aver	nue	
	Florida street addres	s (P.O. Box <u>NO</u>)	[acceptable)
	Chattahoochee	FL	32324
	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)

II NOV IS PH 2: 0

Title: "AMBR" = Authorized Member	Name and Address:
*MGR" = Manager	
MGR — Manager	Gordon Renfro
	1009 Morgan Avenue
	Chattahoochee, FL 32324
(Lica attachment if nagogana)	
(OSC attachment if necessary)	
(Use attachment if necessary)	
	g:(OPTIONAL)
CLE V: Effective date, if other than the date of filing	g: (OPTIONAL) nd cannot be more than five business days prior to or 90 days aft
CLE V: Effective date, if other than the date of filing effective date is listed, the date must be specific as e of filing.)	nd cannot be more than five business days prior to or 90 days aft
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)