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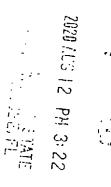
| (Re | questor's Name) | . |
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| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| | dew Filing Section Division of Corporations | | |
|-------------|---|---|--|
| SUBJEC | Fs Paint Supplies LLC | | |
| SUBJEC | Name of Lin | nited Liability Company | |
| The enclo | sed Articles of Organization and fee(s) are | submitted for filing. | |
| Please ret | urn all correspondence concerning this ma | tter to the following: | |
| | Jerry Martinez | | |
| | | Name of Person | |
| | J's Paint Supplies LLC | | |
| | | Firm/Company | |
| | 618 Butch Cassidy Trail | | |
| | | Address | |
| | Wimauma, FL 33598 | | |
| | | ity/State and Zip Code | |
| | jerrymartinez36@yahoo.com E-mail address: (to be used | for future annual report notificat | ion) |
| For further | information concerning this matter, please | call: | |
| | Jerry Martinez | 813, 352-1 | 254 |
| | Name of Person A | rea Code Daytime Telephon | ne Number |
| Enclosed | is a check for the following amount: | | 20 |
| □\$125.0 | 0 Filing Fee ☐\$130.00 Filing Fee & Certificate of Status | □\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Status & (2) Certified Copy (additional copy is enclosed) |
| | Mailing Address New Filing Section Division of Corporations P.O. Box 6327 | Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre | assee mi ro |

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| J's Paint Supplies LLC | |
|--|--|
| (Must conatin the words "Limited Liah | ility Company, "L.L.C.," or "LLC.") |
| | |
| CLE II - Address: | |
| CLE II - Address: alling address and street address of the principal office | of the Limited Liability Company is: |
| | e of the Limited Liability Company is: Mailing Address: |
| tiling address and street address of the principal office | |

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:

Name

618 Butch Cassidy Trail

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

Wimauma FL 33598

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)

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ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company:

| "AMBR" = Authorized Member "MGR" = Manager | | | |
|--|--|------------------|--------------|
| • | | | |
| MGR Jerry Martinez 618 Butch Cassid | v Trail | | |
| Wimauma, F1, 33 | 598 | - | |
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| (Use attachment if necessary) | | | |
| cument's effective date on the Department of State's records. CLE VI: Other provisions, if any. | | | |
| | | | |
| | | | |
| REQUIRED SIGNATURE: | | | |
| REQUIRED SIGNATURE: | | | |
| Signature of a member or an authorize. This document is executed in accordance with | ed representative of a member section 605.0203 (1) (b), Flor | er. ida Statu | |
| REQUIRED SIGNATURE: Signature of a member or an authorize | ed representative of a member section 605.0203 (1) (b), Flor d in a document to the Departm | er. ida Statu | |
| Signature of a member or an authorize This document is executed in accordance with I am aware that any false information submittee constitutes a third degree felony as provided for the Martines. | ed representative of a member section 605.0203 (1) (b), Flor d in a document to the Departur r in s.817.155, F.S. | er. ida Statu | |
| Signature of a member or an authorize. This document is executed in accordance with 1 am aware that any false information submittee constitutes a third degree felony as provided for | ed representative of a member section 605.0203 (1) (b), Flor d in a document to the Departur r in s.817.155, F.S. | er. ida Statu | tate |
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| Signature of a member or an authorize. This document is executed in accordance with I am aware that any false information submittee constitutes a third degree felony as provided for a large Martinez. Typed or printed national Filing Fees: | ed representative of a member section 605,0203 (1) (b), Flor d in a document to the Department in s.817.155, F.S. | er. ida Statu | tate |
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| Signature of a member or an authorize This document is executed in accordance with I am aware that any false information submittee constitutes a third degree felony as provided for Jerry Martinez Typed or printed na Filing Fees: \$125.00 Filing Fee for Articles of Organization and Desig \$30.00 Certified Copy (Optional) | ed representative of a member section 605,0203 (1) (b), Flor d in a document to the Department in s.817.155, F.S. | er. ida Statu | tate |
| Signature of a member or an authorize. This document is executed in accordance with I am aware that any false information submittee constitutes a third degree felony as provided for Jerry Martinez. Typed or printed na Filing Fees: \$125.00 Filing Fee for Articles of Organization and Design | ed representative of a member section 605,0203 (1) (b), Flor d in a document to the Department in s.817.155, F.S. | er. ida Statu | 2020 AUG 112 |
| Signature of a member or an authorize This document is executed in accordance with I am aware that any false information submittee constitutes a third degree felony as provided for Jerry Martinez. Typed or printed na Filing Fees: \$125.00 Filing Fee for Articles of Organization and Desig \$30.00 Certified Copy (Optional) | ed representative of a member section 605,0203 (1) (b), Flor d in a document to the Department in s.817.155, F.S. | er. ida Statu | 2020 AUG 1 |