Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : HUBCO

Account Number: 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

annual report mailings. Enter only one email address please.** MIKEMO1428@GMAIL.COM Email Address

FLORIDA LIMITED LIABILITY CO. STONEWOOD FINISH LLC

er the email address for this business entity to be used for future

Certificate of Status	1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

STONEWOOD FINISH LLC

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

ARTICLE II - Address:

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

Principal Office Address: Mailing Address:

4808 SW 13TH AVE CAPE CORAL, FL 33914 4808 SW 13TH AVE CAPE CORAL, FL 33914

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:

JOSEPH MORALES

1004 NW 33RD PLACE

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

CAPE CORAL

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 ig

Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

JOSEPH MORALES

(CONTINUED)

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"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	MICHAEL MORALES
	4808 SW 13TH AVE
	CAPE CORAL, FL 33914
	
(Lice attachment if necessary)	
(Use attachment if necessary) LE V: Effective date, if other than the date of fill fective date is listed, the date must be specific of filing.)	ling: (OPTIONAL) and cannot be more than five business days prior to or 90 days a
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