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(F	Requestor's Name)	
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PICK-UP	WAIT	MAIL
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(E	Business Entity Name)	
([Document Number)	
Certified Copies	Certificates of S	Status
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Special Instructions to Fi	iling Officer:	





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COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: Barron'S Po	ainting LLC Name of Emited Liabil	ity Company			
The enclosed Articles of Organization		-			
Micanda G	vace Barror)			
	Firm/Cc	ompany			
8686 Flick	Addı				
Tallahassee, Fl	, 323 <i>05</i> City/State or	nd Zip Code	<u></u>		
mgbr 1035 6 E-mail addres	gmail. Com s: (to be used for future).	mnual report notification	ບາາ)	A. LA	20 23 JU
For further information concerning this				ia sšt	J₩2
Miranda Grace Barron Name of Person) 694 5731 Daytime Telephone		TÀLLAHASSEE TI OPIN	2023 JUN-2 AH 5: 44
Enclosed is a check for the following	mount:				
□\$125.00 Filing Fee □\$130.00 Certificate	of Status Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	E/\$160.00 Fi Certificate of Certified Cop (additional cop)	Status & by	ed)
Mailing Address		Street Address			

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, F1, 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Barron's Painting L (Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
RTICLE II - Address: or mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8686 Flicker rd	Same
Tallahasses F1 32305	Lagistarud Agant's Signatura
TTICLE III - Registered Agent, Registered Office, & Rue Limited Liability Company cannot serve as its own Reg	
ETICLE III - Registered Agent, Registered Office, & Rose Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	gistered Agent. You must designate an individual or
Tallahasses F1 32305 PATICLE III - Registered Agent, Registered Office, & Royal Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registered age Micanda Grace Na	gistered Agent. You must designate an individual or ent are:
ETICLE III - Registered Agent, Registered Office, & Rose Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) I name and the Florida street address of the registered age Micanda Grace Na 8686 Flicke	eistered Agent. You must designate an individual or ent are:

wing been named as registered agent and to accept service of process for the above stated limited liability company at the edesignated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I hereby accept the appointment as registered agent and agree to act in this capacity. I hereby accept the provisions of all statutes relating to the proper and complete performance of my duties, and I statutes with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Huran da Barray
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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IALLAHASSI LET ORIDA

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR 8686 Flicker Takahassee (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. VRTICLE VI: Other provisions, if any, REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutés?

Filing Fees:

I am aware that any false information submitted in a document to the Department of State-

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

constitutes a third degree felony as provided for in s.817.155, F.S.

Micanda Grace Baccon
Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)