_ 0000	00073	26
City/State/Zip / Phone #	301	· · · · · · · · · · · · · · · · · · ·
CORPORATION NAME(S) & DOCUM	Office Use Only	
1. Brunckwerks, LLC (Corporation Name) 2. (Corporation Name)	(Document #)	
COLDOLATION ON OF CORPORATION ON OF CORPORATION ON OF CORPORATION ON OF CORPORATION OF CORPORATI	(Document #)	
Walk in Pick up time Mail out	(Document #) Certified Photocopy Certificate	Copy te of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS -06/2 ***** Amendment Resignation of R.A., Officer/Dir Change of Registered Agent Dissolution/Withdrawal Merger	TASS SOLUTION TO THE PARTY OF T
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	122 PH 2: 44 HASSEE FLORIDA
	Examiner	's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Brunckwerks LLC

ARTICLE II - Address:

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

1203 Camellia Drive, Tallahasse, FL, 32301

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Richard P. Brunck
Name 1203 Camellia Drive
Florida street address (P.O. Box <u>NOT</u> acceptable) Tallahassee FL 32301
City, State, and 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 deent as provided for in Chapter 608, F.S..

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

> (An additien is requested)

> > Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated berein are true.

Typed or printed name of signee

FILING FEES:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

30.00 Certified Copy (OPTIONAL)
5.00 Certificate of Status (OPTIONAL)

