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ECRETARY OF STATE

## LIMITED LIABILITY COMPANY

Pro Logic Controls of South Florida, LLC

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### ARTICLES OF ORGANIZATION OF Pro Logic Controls of South Florida, LLC

#### ARTICLE I

NAME

The name of the limited liability company shall be: Pro Logic Controls of South Florida, LLC

#### ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 3611 St Johns Bluff Road South, Suite 5, Jacksonville, Florida 32224.

#### ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

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The name and address of the initial registered agent is: David Todd, 3611 St Johns Bluff Road South, Suite 5, Jacksonville, Florida 32224. Located in the County of Duval.

#### ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2042.

#### ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

David Todd, 126 N. Lakeside Drive, Kennesaw, Georgia 30144 Richard Cook, 1402 Downington View, Acworth, Georgia 30189

Mark Schiff Assistant Vice President

Business Filings Incorporated

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200, Madison, WI 53717 (608) 827-5300

FAX AUDIT # 102002225082

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Pro Logic Controls of South Florida, LLC

The name and address of the registered agent and office is David Todd, 3611 St Johns Bluff Road South, Suite 5, Jacksonville, Florida 32224. Located in the County of Duval.

Having been named as registered agent and to accept service of process for the above stated corporation 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.

SECRETARY OF STATE

Signature:

David Todd

Date: October 24, 2002