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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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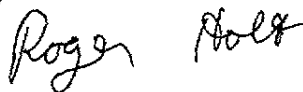
December 28, 2003

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Per your request following information:

Roger Holt
170 Plumosus Drive
Altamonte Springs, FL 32701
Daytime Telephone 407-831-0749
Cell Phone# 407-399-8873

Sincerely

A handwritten signature in cursive script that reads "Roger Holt".

Roger Holt

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROGER HOLT HEATING & AIR LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROGER HOLT
(Name of Person)

ROGER HOLT HEATING & AIR LLC
(Firm/Company)

170 PLUMOSUS DR
(Address)

ALTAMONTE SPRINGS, FLORIDA 327
(City/State and Zip Code)

For further information concerning this matter, please call:

ROGER HOLT at (407) 831-0749
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

ROGER HOLT HEATING & AIR LLC

ARTICLE II - Address:

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

Principal Office Address:

1215 30TH STREET

ORLANDO, FLORIDA 32803

Mailing Address:

170 PLUMOSUS DRIVE

ALTAMONTE SPRINGS, FL 32701

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

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

ROGER HOLT

Name

170 PLUMOSUS DRIVE

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

ALTAMONTE SPRINGS FLORIDA 32701

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 agent as provided for in Chapter 608, Florida Statutes..



Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

ROGER HOLT

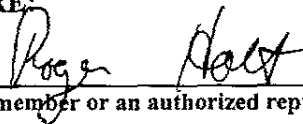
170 PLUMOSUS DRIVE

ALTAMONTE SPRINGS, FLORIDA 32701

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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 herein are true.)

ROGER HOLT

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)

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TAMPA, FLORIDA