

# L04000014969

Florida Department of State  
Division of Corporations  
Public Access System

## Electronic Filing Cover Sheet

**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000040660 3)))

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

**To:**

Division of Corporations  
Fax Number : (850)205-0383

**From:**

Account Name : INCORPORATETIME.COM, INC.  
Account Number : I19990000221  
Phone : (631)224-9004  
Fax Number : (631)589-2848

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 FEB 25 PM 12:19

FILED

## LIMITED LIABILITY COMPANY

Gas Appliance Service of Sarasota L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED  
04 FEB 25 AM 8:06  
DIVISION OF CORPORATION

Electronic Filing Menu

Corporate Filing

Public Access Help

L04-14969  
JR

71040000 406603

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

**ARTICLE I: NAME:**

The name of the Limited Liability Company is:

**Gas Appliance Service of Sarasota L.L.C.**

**ARTICLE II: ADDRESS:**

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

**4411 Bee Ridge Rd. #140, Sarasota, FL 34233**

SECRETARY OF STATE  
TALAHASSEE, FLORIDA

04 FEB 25 PM 12:19

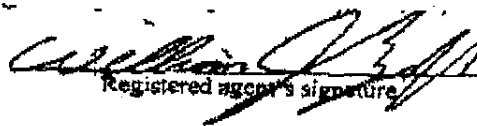
FILED

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE, &  
REGISTERED AGENT'S SIGNATURE:**

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

**William Bryan  
2275 Hillview St.  
Sarasota, FL 34239**

*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, F.S..*

  
Registered agent's signature

71040000 406603

H040000406603

**ARTICLE IV: MANAGEMENT (Check if applicable).**

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


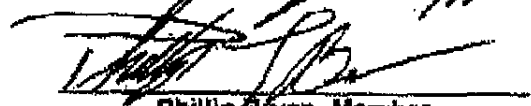
**ARTICLE V: The initial member(s) of the Limited Liability Company is/are as follows:**

William Bryan 4411 Bee Ridge Rd. #140, Sarasota, FL 34233  
Phillip Bryan 5014 Indian Mound st., Sarasota, FL 34232

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 FEB 25 PM 12:15

FILED

  
William Bryan, Member  
  
Phillip Bryan, 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.)

William Bryan, Member  
Phillip Bryan, Member

H040000406603