L04000022162

(Red	questor's Name)	
(Add	iress)	
(Add	dress)	
(City	//State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



500030841965

03/24/04--01001--004 **125.00

SECRETARY OF MAR 23 PH 4: 19

O4 MAR 23 FM 4: 20
DIVISION OF CURI DRATION



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: Thompson Electron & Michanical Co., 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:

Nothan Thompson Ja.
(Name of Person)

Thompson electrical + Mechanical Co. (Firm/Company)

66 andrew Speans Rd.
(Address)

Chaufodville, FL 32327
(City/State and Zip Code)

For further information concerning this matter, please call:

Nathan Shanpan, J., at (850) 926-593.

(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 SECRETARY OF STATE A

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Thompson Electric & Mechanicas	Co., Lihole.
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Antique, Impore, h. Jole Andrew Leans Rd Chawfodville, FL 32327 ARTICLE III - Registered Agent, Registered Office. The name and the Florida street address of the registered.	<u>Same</u>
ARTICLE III - Registered Agent, Registered Office	, & Registered Agent's Signature:
The name and the Florida street address of the registere	d agent are:
Florida street address (P.O. Box No.	OT acceptable) 31327
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, F.S..

Registered Agent's Signature

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager	<u>Na</u>	me and Ad	dress:	-			
"MGRM" = Managing Member							
mgrm	, , <u> </u>	Aathan Late an Crawy	The Tree	mpson. Locari We,FL	J. Rd 3232	7	
	7 <u></u>	· · · · · · · · · · · · · · · · · · ·			, ,	· ·	. 5
-				<u></u>	<u> </u>	<u> </u>	**** · -
	.2			1	<u> </u>	۔ . یا ۱۹۹۱ بر	1. 45 1. 45 4.
<u> </u>	1 T	<u> </u>				04 MAR 23	FREEERS
(Use attachment if necessary)	aust be add	od if an aff	ativa d	ata is manus	antad	3 PA 4: (3	EF. FLORE
NOTE: An additional article n REQUIRED SIGNATURE:	uust ve auu	cu II an eile	chve u	aic is reque	sicu.	· ·	ם פ

-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.)

1 Nam 050N. Ja 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)