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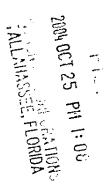
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J. BRYAN OCT 2 6 2004

## TRANSMITTAL LETTER

_	stration Section ion of Corporations		
SUBJECT:	HASSETT INSTALLATIONS	S, LLC	_
	(Name of Limite	ed Liability Company)	_
The enclosed	l Articles of Organization and fee	(s) are submitted for filing.	
Please return	all correspondence concerning the	nis matter to the following:	
KEVIN HA	SSETT		
	(Name of Person)		
			是是
	(7)		25
	(Firm/Company)		是是
3824 VIRG	GA BLVD		2004 OCT 25 PM 1: 08
<del>***</del>	(Address)	<del></del>	× 50
SARASOT	A, FL 34234		
	(City/State and Zip Code)		
For further in	nformation concerning this matter	, please call:	
KEVIN HA	SSETT	at (941) 2047658	_
	(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET AI	DDRESS:	MAILING ADDRESS:	
Registration		Registration Section Division of Corporations	
Division of C	ornorations	DIVISION OF CORDORATIONS	

P.O. Box 6327

Tallahassee, Florida 32314

409 E. Gaines Street

Tallahassee, Florida 32399

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is: HASSETT INSTALLATIONS, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Compa

T	 Address:

**Mailing Address:** 

1126 SNEAD AVE.

SARASOTA, FL 34237

1126 SNEAD AVE.

SARASOTA, FL 34237

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

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

KEVIN HASSETT

Name

3824 VIRGA BLVD.

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

SARASOTA

... 34234

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..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:		Name and Address:	
"MGR" = Manager "MGRM" = Manager			
MRG	mg Wember	KEVIN HASSETT	
	•	3824 VIRGA BLVD	
		SARASOTA, FL 34234	TOWN OCT 25 PM 1: 03
			是 3
-			- SEL 3
			- 70 10
			-
			<del></del>
(Use attachment if i	necessary)		
NOTE: An addition	onal article must be a	idded if an effective date is requested.	
REQUIRED SIGN	Let		
	Signature of a member or	r an authorized representative of a member.	
	(In accordance with section of this document constitute that the facts stated herein	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury 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)