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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOWRY Mechanical L.L.C.
(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:

Dennis P. Mowry
(Name of Person)

MOWRY Mechanical L.L.C.
(Firm/Company)

P.O. Box 2304
(Address)

Riverview FL 33568-2304
(City/State and Zip Code)

For further information concerning this matter, please call:

Dennis P. Mowry at (813) 900 849-0135
(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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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mowry Mechanical L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

10220 Fisher Ave. #10

TAMPA FL 33619

Mailing Address:

P.O. Box 2304

Riverview, FL 33568-2304

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

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

Dennis P. Mowry

Name

Fisher
10220 ~~10220~~ Ave #10

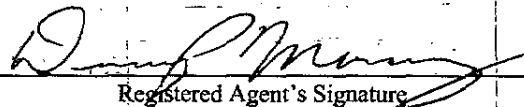
Florida street address (P.O. Box **NOT** acceptable)

Tampa

FLORIDA 33619

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

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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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

Dennis P. Mowry
13203 Laramay Ct
Riverview, FL 33569

MGRM

SUSAN R. MOWRY
13203 Laramay Ct.
Riverview, FL 33569

(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.)

Dennis P. MOWRY

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) X

\$ 5.00 Certificate of Status (Optional) ✓

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