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(Business Entity Name)

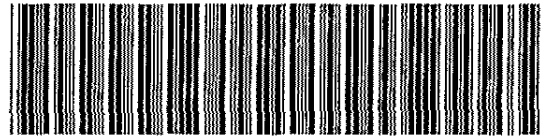
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12/29
CWS

1434 S Gabriel St
Hollywood, FL 33020
(954) 929-1424 - Home
(954) 205-3820 - Cell
billamirault@bellsouth.net

December 9, 2004

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

Dear Sir or Madam:

Please accept this cover letter, transmittal letter, attached articles of organization as my filing for registration of an LLC. I've also enclosed a check for \$130.00 to cover the Filing Fee and Certificate of Status.

Please do not hesitate to call with any questions. My contact information is in the upper right hand corner of this cover letter.

Sincerely,

William J Amirault



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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Amirault & Lehan, 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:

William J. Amirault
(Name of Person)

(Firm/Company)

1434 S. Gabriel St
(Address)

Hollywood, FL 33020
(City/State and Zip Code)

For further information concerning this matter, please call:

William Amirault at (954) 205-3820
(Name of Person) (Area Code & Daytime Telephone Number)
William Lehan (781) 856-9516

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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:

Amirault + Lehan, 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:

1434 S. Gabriel St
Hollywood, FL 33020

Mailing Address:

1434 S. Gabriel St
Hollywood, FL 33020

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

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

William J. Amirault
Name
1434 S. Gabriel St
Florida street address (P.O. Box **NOT** acceptable)
Hollywood, FL 33020
City, State, and Zip

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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..

Wm J. Amirault
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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

<u>MGR</u>	<u>William J. Amirault</u> <u>1434 St. Gabriel St.</u> <u>Hollywood, FL 33020</u>
<u>MGR</u>	<u>William Lehan</u> <u>17 Lagtern Lane</u> <u>Falmouth, MA 02540</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

William J. Amirault
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.)

William J Amirault
Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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