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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations SUBJECT: SHANE FREZMAN WELDING 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: FREE MAN WELDING SHANG. (Firm/Company) Jacksonville, FL 32246 (City/State and Zip Code) For further information concerning this matter, please call: at (<u>904</u>) <u>645-3482</u> (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: □ \$160.00 Filing Fee, ☐ \$125.00 Filing Fee **☑** \$130.00 Filing Fee & □ \$155.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 9, 2004

SHANE FREEMAN 3207-4 FOREST BLVD. JACKSONVILLE, FL 32246

SUBJECT: SHANE FREEMAN WELDING

Ref. Number: W04000045073

We have received your document for SHANE FREEMAN WELDING and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 604A00068949

Michelle Hodges Document Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADDITOR	177 T	7.6	_
ARTICI	.H. 1	- Nam	Α.

The name of the Limited Liability Company is:

FREEMAN WELDING LLC

ARTICLE II - Address:

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

Principal Office Address: Mailing Address:

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

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

3207-4 Forest Blub.

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

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)

Page 1 of 2

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 "MGRM" = Managing Member	Name and Address:
MGR	SHANE FREEMAN 3207-4 Forest BIOD JAK. FL 32246
Use attachment if necessary)	
NOTE: An additional article must	t 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.)

Freeman

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)