

L040000 93972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2004 DEC 21 AM 10:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

12/29/04  
J. H. Smith

**Food Service Equipment Repair's and Installations LLC.**

6053 NW 41 Circle  
Bell, Florida 32619  
Office: 386-935-1776  
Cell: 386-365-7564  
Fax: 386-935-1776

December 15, 2004

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

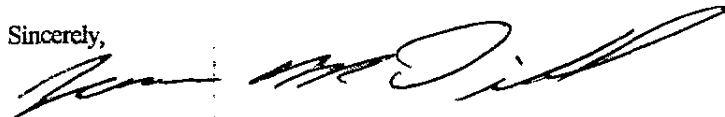
To Whom It May Concern:

Attached please find the Articles of Organization and my check in the amount of \$125.00 for filing fees.

I have also sent an additional copy of the Articles of Organization for you to send back once filed.

If you have any questions, or require additional information, please do not hesitate to contact me at the above numbers.

Sincerely,



James M. Diehl; Owner Operator  
Food Service Equipment Repair's and Installations LLC.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Food Service Equipment Repair's and  
(Name of Limited Liability Company) Installations  
LLC.

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

James Michael Diehl  
(Name of Person)

Food Service Equipment Repair's and Installations,  
(Firm/Company) LLC.

6053 NW 41 Circle  
(Address)

Bell, Florida 32619  
(City/State and Zip Code)

For further information concerning this matter, please call:

James M. Diehl at (386) 935-1776  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Food Service Equipment Repair's and Installations  
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:

6053 NW 41 Circle  
Bell Florida 32619

#### Mailing Address:

6053 NW 41 Circle  
Bell Florida 32619

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

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

James M. Diehl  
Name

6053 NW 41 Circle  
Florida street address (P.O. Box **NOT** acceptable)

Bell FL 32619  
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.

[Signature]  
Registered Agent's Signature

FILED  
JAN 10 2008  
AM 10:25  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

(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:**

MGR

James M. Diehl  
6053 NW 41 Circle  
Bell FL 32619

MGRM

Danielle Diehl  
6053 NW 41 Circle  
Bell FL 32619

\_\_\_\_\_

\_\_\_\_\_

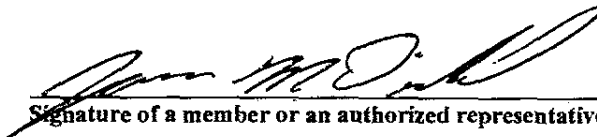
\_\_\_\_\_

\_\_\_\_\_

(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.)

James M. Diehl  
Typed or printed name of signer

**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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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L.L.C.

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Bell Florida 32619

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Name

6053 NW 41 Circle  
Florida street address (P.O. Box **NOT** acceptable)

Bell FL 32619  
City, State, and Zip

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Registered Agent's Signature

(CONTINUED)

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**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

James M. Diehl  
6053 NW 41 Circle  
Bell FL 32619

MGRM

Danette Diehl  
6053 NW 41 Circle  
Bell FL 32619

(Use attachment if necessary)

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

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James M. Diehl

Typed or printed name of signer

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