

LO5000007665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

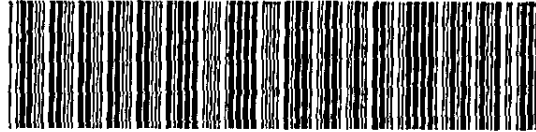
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name	
Availability	
Document	
Exhibit	
Updater	Office Use Only
Updater	
Ver Year	
Addressed	DOC
W. P. Ver Year	DOC



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EFFECTIVE DATE
1/20/05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 JAN 14 P 3:51

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mickler Refrigeration & Consulting "LLC"
(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:

Edward L. Mickler
(Name of Person)

(Firm/Company)

210 N. Serenata Dr. #513
(Address)

S. Ponte Vedra Bch., Fl 32082
(City/State and Zip Code)

For further information concerning this matter, please call:

Edward L. Mickler at (904) 923-5040
(Name of Person) (Area Code & Daytime Telephone Number)

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

RECEIVED
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA
 JUN 14 3 51 PM '87

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mickler Refrigeration & Consulting "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:

210 N. Serenata Dr. #513
S. Ponte Vedra Beach, FL 32082

same

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

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

Edward L. Mickler

Name


210 N. Serenata Dr. #513

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

S. Ponte Vedra Bch. FL 32082

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.



Registered Agent's Signature

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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

Edward L. Mickler

210 N. Serenata Dr. #513

Ponte Vedra Beach, Fl 32082

(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.)

Edward L. Mickler

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE IV – EFFECTIVE DATE

JANUARY 20TH 2005

FILED

2005 JAN 14 P 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA