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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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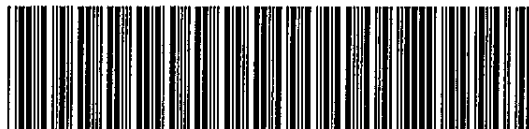
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PRESHA & SON'S 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:

BERNARD PRESHA

(Name of Person)

PRESHA & SON'S LLC

(Firm/Company)

820 CHIPLEY CT.

(Address)

WINTER PARK, FL 32792

(City/State and Zip Code)

For further information concerning this matter, please call:

BERNARD PRESHA

(Name of Person)

at (407)

672-2855

(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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PRESHA & SON'S LLC

ARTICLE II - Address:

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

Principal Office Address:

1415 OCEAN SHORE BLVD. #811
ORMOND BEACH, FL. 32176

Mailing Address:

820 CHIPLEY COURT
WINTER PARK, FL 32792

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

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

BERNARD J. PRESHA

Name

820 CHIPLEY COURT

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

WINTER PARK

FL 32792

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

(CONTINUED)

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The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member

WINTER PARK, FL 32792

WINTER PARK, FL 32792

Typed or printed name of signee

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