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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Whatcha U Need Welding &	Fabrication, LLC.		
(Name of Limited Liability Company)			
The enclosed Articles of Organization and fee(s) are sur Please return all correspondence concerning this matter			
1 jesse retain an correspondence concerning and mane	to the fone wasg.		
Ronnie L. Lee	· <u></u>	_	
(6	lame of Person)		
(F	Firm/Company)		
2333 Fern Palm Drive			
	(Address)	ALL SEC	
Edgewater, FL 32141		27 28 88	
(City/	State and Zip Code)	ms P	
For further information concerning this matter, please of	call;	05 MAY 27 PM 4: 31 SECKLI/GCC UT STATE TALLAHASSEE, FLORIDA	
Ronnie L. Lee	at (386 \ 689-2	954	
(Name of Person)	(Area Code & Daytime Te	elephone Number)	
Enclosed is a check for the following amount:			
\$\frac{1}{2}\$\$\frac{1}{2}\$\$.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:	MAILING A		
Registration Section Division of Corporations	Registration S Division of Co		
409 E. Gaines Street	P.O. Box 6327	7	
Tallahassee, Florida 32399	Tallahassee, F	Torida 32314	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	ş:	
Whatcha U Need Welding & Fabricat	ion, LLÇ.	
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Lial	bility Company is:
Principal Office Address:	Mailing Address:	
2333 Fern Palm Drive	same	
Edgewater, FL 32141		
,		
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the Ronnie L. Lee Nam	registered agent are:	FILED OS MAY 27 PM 4: 31 SIGNAT ALLAHASSEE, FLORID SIGNATION SIGNATURE OF MAY 27 PM 4: 31
2333 Fern Palm Drive		
Florida street a	ddress (P.O. Box NOT acceptable)	ORBE
Edgewater City, State	FL 32141 , and Zip	D'
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacistatutes relating to the proper and complete paccept the obligations of my position as registered Agent.	this certificate, I hereby accept the ity. I further agree to comply with to performance of my duties, and I am gistered agent as provided for in Ch	e appointment as the provisions of all familiar with and

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u>	Name and Address:		
"MGR" = Manager			
"MGRM" = Managing Member			
MGRM	Ronnie L. Lee		
	2333 Fern Palm Drive		
	Edgewater, FL 32141		
·			
(Use attachment if necessary)			
NOTE: An additional article must	be added if an effective date is requested.		
REQUIRED SIGNATURE:			
Signature of a member	r or an authorized representative of a member.		
(In accordance with sec of this document constitute that the facts stated here.)	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)		
D-main T T			

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)

DS MAT 27 PM 4:31 SECKLIANT OF STATE ALL AHASSEF FLORIDA

Typed or printed name of signee