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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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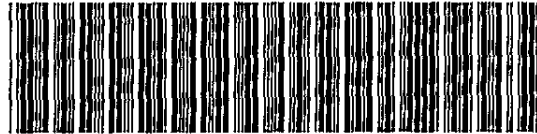
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MERRITT POWERWASHING, WATERPROOFING, & GLASS SERVICE 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:

IREY K. MERRITT

(Name of Person)

MERRITT POWERWASHING, WATERPROOFING, & GLASS SERVICE LLC  
(Firm/Company)

1641 WINDLACE COURT

(Address)

JACKSONVILLE, FL. 32225

(City/State and Zip Code)

For further information concerning this matter, please call:

IREY K. MERRITT

(Name of Person)

at ( 904 ) 525-2120

(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

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
MERRITT POWERWASHING, WATERPROOFING, & GLASS SERVICE LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

**ARTICLE I - NAME**

The name of the limited liability company shall be  
MERRITT POWERWASHING, WATERPROOFING, & GLASS SERVICE LLC

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the company is  
1641 WINDLACE COURT JACKSONVILLE, FL 32225

**ARTICLE III - REGISTERED OFFICE AND AGENT**

The name and street address of the registered agent of the company in the state of Florida is:

IREY K. MERRITT  
1641 WINDLACE COURT  
JACKSONVILLE, FL. 32225

Having been named as registered agent and to accept service of process for the above named limited liability company at the place designated herein, I hereby accept 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 F.S. Chapter 608.



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TALLAHASSEE, FLORIDA

ARTICLE IV - EFFECTIVE DATE

The effective date of the company shall be date of filing.

ARTICLE V - Managing Members

The name and address of each managing member is as follows:

Managing Member

IREY K. MERRITT

1641 WINDLACE COURT

JACKSONVILLE, FL. 32225

Irey K. Merritt

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