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## TRANSMITTAL LETTER

Division of Co			
SUBJECT: Charles T	eeter Installations, LLC		
	(Name of Limite	d Liability Company)	
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Barbara :	Sandness		
	()	Name of Person)	
Charles Teeter Insta	the state of the s	Firm/Company)	
	· ·		
3330 SW 27	'th Avenue		
	· · · · · · · · · · · · · · · · · · ·	(Address)	
Cape	Coral, FL 33914		
	(City/	/State and Zip Code)	- <del></del>
For further information of	concerning this matter, please	call:	
Barbara Sandness		at (_239) 945-5526	
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check fo	r 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)
CTDF	ET ANDDESS:	MAILING A	nnpres.
STREET ADDRESS: Registration Section		Registration S	•
Division of Corporations		Division of Co	orporations Section 1
409 E. Gaines Street Tallahassee. Florida 32399		P.O. Box 6327 Tallahassee, F	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:
Charles Teeter Installations, LLC	
ARTICLE II - Address:	
The mailing address and street address of the	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3330 SW 27th Avenue	3330 SW 27th Avenue
Cape Coral, FL 33914	Cape Coral, FL 33914
The name and the Florida street address of t	ered Office, & Registered Agent's Signature: the registered agent are:
Barbara Sandness	ame
N	ame
3330 SW 27th Avenue	
Florida stree	et address (P.O. Box <u>NOT</u> acceptable)
Cape Coral, FL 33914	FL
City, St	tate, and Zip
Having been named as registered agent and	d to accept service of process for the above stated limited

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)

Page 1 of 2

## 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	
MGR	Charles Teeter
	3330 SW 27th Avenue
	Cape Coral, FL 33914
MGR	Barbara Sandness
	3330 SW 27th Avenue
	Cape Coral, FL 33914
	**************************************
(Use attachment if necessary)	
NOTE: An additional article m	ust be added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a mer	Smanus mber or an authorized representative of a member.
(In accordance with of this document of	n section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ed herein are true.)
Barbara Sandne	SS
	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)