

L05000074660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

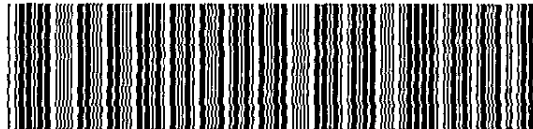
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07/29/05--01037--013 \*\*155.00

FILED  
05 JUL 29 PM 1:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
05 JUL 29 AM 11:09  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

**FILING COVER SHEET**  
**ACCT. #FCA-14**

**CONTACT:**      KATIE WONSCH

**DATE:**            07/29/2005

**REF. #:**           000174.40753

**CORP. NAME:**   STERLING FABRICATING, LLC

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- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

**STATE FEES PREPAID WITH CHECK# 5138 FOR \$ 155.00**

**AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

\_\_\_\_\_ **COST LIMIT: \$**\_\_\_\_\_

**PLEASE RETURN:**

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials

# ARTICLES OF ORGANIZATION

STERLING FABRICATING, LLC,  
a Florida limited liability company

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TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

STERLING FABRICATING, LLC

## ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

2226 8th Street  
Sarasota, Florida 34237

## ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Tom Shapiro  
2226 8th Street  
Sarasota, Florida 34237

## ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the  
20th day of JULY, 2005.

WITNESSES:

Adonica J. Church  
Print Name Adonica J. Church

Tom Shapiro  
Tom Shapiro

Bobbi Fath  
Print Name Bobbi Fath

Bobbi Fath  
Print Name Bobbi Fath

Steve Shapiro  
Steve Shapiro

Jennifer Stacco  
Print Name Jennifer Stacco

Bobbi Fath  
Print Name Bobbi Fath

Jack Mead  
Jack Mead

Jennifer Stacco  
Print Name Jennifer Stacco

Bala Venkatarman

Bobbi Fath  
Print Name Bobbi Fath

Bala Venkataraman  
Bala Venkataraman

Jennifer Stacco  
Print Name Jennifer Stacco

"MANAGERS"

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

STERLING FABRICATING, LLC

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

Tom Shapiro  
2226 8th Street  
Sarasota, Florida 34237

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: 1-20-05

  
Tom Shapiro

"REGISTERED AGENT"