

LOS000095804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

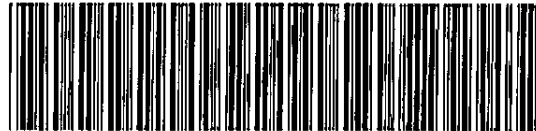
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 SEP 20 PM 12:19

RECEIVED
FILING OFFICE

B. McKnight SEP 29 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Engineered Devices & Solutions

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patricia Peltz

**Engineered Devices & Solutions
4374 Parkway Drive
Melbourne, FL 32934**

For further information concerning this matter, please call:

David Peltz at (321) 917-3294

Enclosed is a check for the following amount:

U \$125.00 Filing Fee U \$130.00 Filing Fee & ~~X~~ \$155.00 Filing Fee & U \$160.00 Filing Fee, Certificate of
Certificate of Status Certified Copy Status & Certified Copy
(additional copy is enclosed) (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The name of the Limited Liability Company is:

Engineered Devices & Solutions, L.L.C.

ARTICLE II

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

Principal Office Address:

**4374 Parkway Drive
Melbourne, FL 32934**

Mailing Address:

**4374 Parkway Drive
Melbourne, FL 32934**

ARTICLE III

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

Patricia Peltz

**4374 Parkway Drive
Melbourne, FL 32934**

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 (REQUIRED)

(CONTINUED)
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CLERK OF COURT
STATE OF FLORIDA
JUDICIAL OFFICE

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Patricia Peltz
4374 Parkway Drive
Melbourne, FL 32934

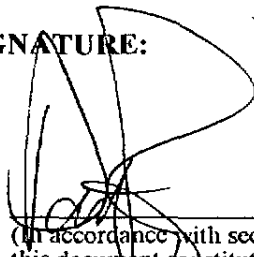
MGRM

David Peltz
4374 Parkway Drive
Melbourne, FL 32934

ARTICLE V

The effective date is as of the date of filing.

REQUIRED SIGNATURE:



(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

David Peltz

Typed or printed name of signee