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(Re	questor's Name)
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
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(Cit	ry/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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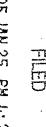
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SECRETALL OF STATE



COVER LETTER

TO:	Registration Se Division of Cor				
SUBJE	_{ECT:} L&LP	lumbing Industries, Ll	LC		
		(Name of Limited	d Liability Compa	ny)	
The en	closed Articles of	Organization and fee(s) are so	ubmitted for filing	,.	
Please	return all corresp	ondence concerning this matte	r to the following:	:	
	Jose Ruiz				
		a a	Name of Person)	· •	8 100 - 2 V
	L & L Plum	bing Industries			
		-(Firm/Company)		
	3298 Delb	rook Drive			
			(Address)	*	, — , — ,
	Deltona, F	lorida 32738			
			State and Zip Code) =	
For fur	ther information	concerning this matter, please	cail:		
Jose	Ruiz		at (386	532-918	9
	(Name	of Person)	(Area Code	& Daytime Te	elephone Number)
Enclos	sed is a check fo	or the following amount:			
□ \$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy i	1	✓ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Addression Section of Corporation uilding centive Center ee. FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:
L & L Plumbing Industries, LLC	
(Must end with the words "Limited Liability Company, "Li	mited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3298 Delbrook Drive	3298 Delbrook Drive
Deltona, Florida 32738	Deltona, Florida 32738
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The name and the Florida street address of the	e registered agent are:
Keith R Wilson	
Na	me ***
2465 Oxford Road	
Florida street	address (P.O. Box NOT acceptable)
DeLand, Florida 32724 City, Stat	FL te, and Zip
Having been named as registered agent and liability company at the place designated i	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all

egistered agent und 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) Page 1 of 2 SECREMAN 25 PM 4: 20

APPROVED

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

MGR	
	Jose Ruiz
	3298 Delbrook Drive
	Deltona, Florida 32738
MGRM	Cesar Montero
1	1976 North Nemo Drive
	Delfona, Florida 32725
. ,	
(Use attachment if necessary) CLE V: Effective date, if other than the di	
effective date is listed, the date must be 90 days after the date of filing.)	specific and cannot be more than five business days prio
	specific and cannot be more than five business days prior
90 days after the date of filing.) REQUIRED SIGNATURE:	specific and cannot be more than five business days prior
REQUIRED SIGNATURE: Signature of a member (In accordance with sect	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury
REQUIRED SIGNATURE: Signature of a member (In accordance with sect of this document constitution)	or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury

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)