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J. BRYAN

MAR 2-1 2006



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03/21/06--01029--025 **125.00

COVER LETTER

TO: Registration Sec Division of Corp		·	
SUBJECT: CLEM		UD AIR CONDITION d Liability Company)	11N G
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.	
Please return all correspo	ondence concerning this matte	er to the following:	
STEV	EN F. CLEMON	Name of Person)	.
CLEMON	s HEATING AND	AJR CONDITIONING Firm/Company)	DEC.
2067	OSCAR HARVEY	RD (Address)	AR 2) T
TALLAH	ASSEC, FL 32.	3 6 State and Zip Code)	OF STATE
For further information c	oncerning this matter, please	call:	5
STEVEN F.	CLEMONS of Person)	at (850) 519 - (Area Code & Daytime 7	1289 elephone Number)
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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	Street/Courier Addre Registration Section Division of Corporation Clifton Building 2661 Executive Cente	ons r Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY 2
CLEMONS HEATING AND A (Must end with the words "Limited Liability Company, "Limited	IR CONDIDANING, LLC TO THE TOTAL TOT
ARTICLE II - Address:	CARLE 53
The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

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

business entity with an active Florida registration.)

MARIA L. CLEMONS

Name

2068 OSCAR HORJEY Rd.

Florida street address (P.O. Box NOT acceptable)

TA//AhaSsee, FL 323/0

City, State, and Zip

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..

gistered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Mana The name and address of each Manage	aging Member(s): er or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	STEVEN F. CLEMONS 2068 OSCAR HARVEY RD TALLAHASSEE, FL 32310
(Use attachment if necessary) RTICLE V: Effective date, if other than the	date of filing: (OPTIONAL)
or 90 days after the date of filing.)	specific and cannot be more than five business days prior
REQUIRED SIGNATURE: Signature of a member	r or an authorized representative of a member.
of this document constitution that the facts stated here.	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.) Deed or printed name of signee

Filing Fees:

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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)