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COVER LETTER

TO: Registration Section Division of Corpo					
SURJECT: AA ONSI	TE FUEL POLISHIN	NG, LL	.C		
5016DC1.	(Name of Limited			ny)	
The enclosed Articles of O	rganization and fee(s) are su	ıbmitted	for filing.		
Please return all correspon	dence concerning this matter	r to the fo	ollowing:		
Annie J. Adk	ins, Esquire				
	(1)	vame of P	erson)		
AA ONSITE	FUEL POLISHING	, LLC			
	(1)	Firm/Com	pany)		
100 E. Linto	n Blvd. Suite 304	A			
		(Addres	ss)		
Delray Bead	ch, Florida 33483				
<u></u>	(City/	State and	Zip Code))	
For further information con	ncerning this matter, please of	call:			
Annie J. Adkins, Es	squire	at (56°	1,	543.031	6
(Name of				& Daytime To	elephone Number)
Enclosed is a check for t	he following amount:				
	S130.00 Filing Fee & Certificate of Status	Certifi	ied Copy	ling Fee & , s enclosed)	\$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	I I	Registration of Clifton Bud 1661 Executed Section 1661 Execute 1661 Ex	urier Addression Section of Corporation uilding cutive Centeree, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Con	npany is:
·	
AA ONSITE FUEL POLISHING, LLC	
(Must end with the words "Limited Liability Comp	any, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address	s of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
AA ONSITE FUEL POLISHING, LLC	
100 E. Linton Blvd. Suite 304A	
Delray Beach, Florida 33483	
	
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's Signature:
	s own Registered Agent. You must designate an individual or another
business entity with an active Florida registration.	

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

Annie J. Adkins, Esquire

Name

100 E. Linton Blvd. Suite 304A

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

Delray Beach

FL 33483

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..

Registered Agent's Signature (REQUIRED)

(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> "MGR" = Manager	Name and Address:
"MGRM" = Managing Mem	ıber
MGRM	John David Roof
	100 E. Linton Blvd. Suite 304A
	Delray Beach, Florida 33483
•	
(Use attachment if necessary	v)
OF THE TATAL PROPERTY OF THE SALES AND THE SALES	Aloreh 45 2006
LE V: Effective date, if other factive date is listed, the dat	r than the date of filing: March 15, 2006. (OPTIONA e must be specific and cannot be more than five business days
days after the date of filing.	
REQUIRED SIGNATURE	2:
~	

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)

that the facts stated herein are true.)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee