

Florida Department of State

Division of Corporations Public Access System 2006 JUL 27 A 8: 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H060001904813)))



H060001904813ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : CORPOLICENSE, INC

Account Number : I20050000118 Phone : (305)774-9606

Fax Number : (305)774-9600

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED

06 JUL 27 PM 1:37

IIVISION OF CORPORATI

TOMIS CONTRACTING, LLC

Certificate of Status	1
Certified Copy	. 0
Page Count	01
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

7/27/2006

99967778**0**8

11:00 9002/22/20

H06000 19048ED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY SECRETARY OF STATE OF TOMIS CONTRACTING, LLC

2006 JUL 27 A 8: 56 TALLAHASSEE, FLORIDA

ARTICLE I - NAME:

The name of the Limited Liability Company Is:

TOMIS CONTRACTING, LLC

<u> ARTICLE II - ADDRESS:</u>

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

Principal Office Address:

Mailing Address:

9856 Woolworth Court West Palm Beach, FL 33414 9856 Woolworth Court West Palm Beach, FL 33414

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

Traian Coman

9856 Woolworth Court West Palm Beach, FL 33414

H06000190481

H060001904811LED

Having been named as registered agent and to accept service of process falls JUL 27 A 8: 56 the above stated Limited Liability Company at the place designated in this certificate, I hereby accept the appointment as Registered Agent and apper AHASSEE, FLORIDA 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.

Traian Coman

ARTICLE IV - Management/Member(s):

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

TITLE:

NAME AND ADDRESS:

MGR

Traian Coman

9856 Woolworth Court

West Palm Beach, FL 33414

MGR

Nicolae Coman

9856 Woolworth Court

West Palm Beach, FL 33414

Traian Coman

(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)

HOG 000190481