

Florida Department of State

Division of Corporations
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Pierce

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 AUG 22 AM 9:15

FLORIDA/FOREIGN LIMITED LIABILITY CO.

SAWGRASS-JC INSTALLERS, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SAWGRASS-IC INSTALLERS, LLC

ARTICLE II - Address:

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

290 NW 165 STREET #M100
MIAMI, FL. 33169

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

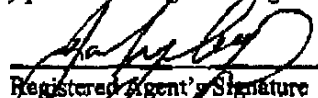
The name and the Florida street address of the registered agent are:

John Coetzee
Name

859 NE 115 Street
Florida street address (PO Box NOT acceptable)

Miami, Fl. 33161
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 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

ARTICLE IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, manager-managed company.

An additional article must be added if an effective date is requested

Signature of a member or an authorized representative of a member.

(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.)

John Coetzee
Typed or printed name of signer

Aug 21, 06
Date

