Division of Corporations

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Division of Corporations

Fax Number

: (850)205-0383

From:

: A 1 A CORPORATE SERVICES, INC. Account Name

Account Number : I20010000247

Phone Fax Number

(800) 494-3124 : (305)675-2811

ORIDA/FOREIGN LIMITED LIABILITY CO.

PRO HOME & COMMERCIAL MAINTENANCE SERVICES LLC

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#### ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

### ARTICLE I NAME

The name of the Limited Liability Company is:

ALL-PRO HOME & COMMERCIAL MAINTENANCE SERVICES LLC

#### ARTICLE II ADDRESS

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

1291 BLACKRUSH DR

TARPON SPRINGS, FL 34689

# ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

A1A REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY FL 32351

Istered agent to accept service of process for the above

Having been named as registered agent 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..

A1A REGISTERED AGENT INC. / Registered Agent's

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ALL-PRO HOME & COMMERCIAL MAINTENANCE SERVICES LLC

#### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

ROBERT CONNINGTON
1291 BLACKRUSH DR
TARPON SPRINGS, FL 34689

MANAGING MEMBER:

CLIFFORD QUILTY 609 FAIR OAKS DR TARPON SPRINGS, FL 34689 FILEU

06 SEP -8 AH 10: 14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature of a member or an authorized representative of a member

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.

CLIFFORD QUILTY

Typed or printed name of signee