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SECRETARY OF STATE
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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	ct: <u>East</u>	Florida Name of Limited	a Electric, Li Liability Company)	LC
The enc	losed Articles of Organization	and fee(s) are su	bmitted for filing.	
Please r	return all correspondence conce	ming this matter	to the following:	
_	Josep	L Allen	Brown Jr.	
		,	,	
_	East	Floride	a Electric, L	.LC

	215	59 SW	88 th Ave (Address)	
-				
	Miar	ni Fl	33/89 State and Zip Code)	
_	** ***********************************	(City/	State and Zip Code)	
For furt	her information concerning this	matter, please c	all:	
Jos	seph Allen Brown (Name of Person)	in Jr	at (<u>786</u>) <u>587</u> -	-5990
	(Name of Person)	14.	(Area Code & Daytime Te	lephone Number)
Enclose	ed is a check for the followin	g amount:		
▼ \$125.	.00 Filing Fee \$\sum \\$130.00 Certificate of		\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Ade Registration Division of P.O. Box 63 Tallahassee	Section Corporations 27	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center	is

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

East	Florida	Electric,	LLC	
(Must end with the words "Limite	ed Liability Company,	"Limited Company" or t	heir abbreviation '	'LLC," or "L.C.,")

ARTICLE II - Address:

Principal Office Address:

ARTICLE I - Name:

The name of the Limited Liability Company is:

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

Mailing Address:

(The Limited Liability Co	mpany cannot serve as its own Regi	ed Office, & Registered Agen istered Agent. You must designate an in-	nt's Signature: dividual or another
•		Brown Jr.	06 OCT
	Name 21559 SW Florida street ad Migmi		-4 PH 2:3

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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:**

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.)

Joseph Allen Brown Typed or printed name of signee

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)