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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

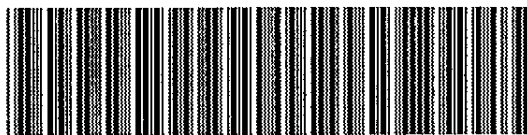
(Business Entity Name)

(Document Number)

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MELVIN R. HORNE

Attorney At Law
146 South Broad Street
Cairo, Georgia 39828

Mailing Address
P.O. Box 188
Cairo, GA 39828

Telephone (229) 377-0968
Telecopier (229) 377-0965
melhorne@hotmail.com

November 17, 2006

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Registration of LLC / **Hydronic Thermal Systems LLC**

Dear Sir/Madam

Am enclosing for registration the Articles of Organization and Designation of Registered Agent and my trust check in the amount of \$125.00.

Thank you for your assistance.

Sincerely,



Melvin R. Horne

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HYDRONIC THERMAL SYSTEMS, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MELVIN R. HORNE

(Name of Person)

HORNE LAW FIRM

(Firm/Company)

P.O. BOX 188

(Address)

CAIRO GA 39828

(City/State and Zip Code)

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For further information concerning this matter, please call:

MELVIN R. HORNE

(Name of Person)

at (229) 377-0968

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is 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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION
HYDRONIC THERMAL SYSTEMS, LLC

ARTICLE I: NAME

The name of the Limited Liability Company is: Hydronic Thermal Systems, LLC

ARTICLE II: ADDRESS

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

Principal Office Address:

Mailing Address:

8840 9th Street North
St. Petersburg, Fl 33702

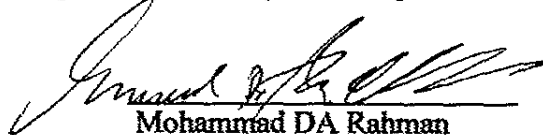
8840 9th Street North
St. Petersburg, Fl. 33702

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE
AND REGISTERED AGENTS SIGNATURE**

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

Mohammad DA Rahman
8840 9th Street North
St. Petersburg, FL 33702

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..


Mohammad DA Rahman

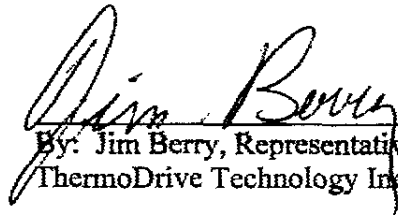
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ARTICLE IV: MANAGER(S) OR MANAGING MEMBERS(S)

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

Title:	Name and Address:
Mgr. Member	ThermoDrive Technology Inc., a Florida corporation 11062 117th St. North Largo, FL 33778
Mgr. Member	Espar Inc., a U.S. corporation (Illinois) <u>6099A Vipond Dr.</u> <u>Mississauga, Ontario</u> <u>Canada L5T 2B2</u>

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.


By: Jim Berry, Representative of Member
ThermoDrive Technology Inc.

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