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SUBJECT: _	5	un Coast	Meter	Services Liability Company)	cla	c	والمتراب والمتراب		
		(Nam	e of Limited	Liability Company)	•				-
The enclosed A	Articl e s o	f Organization and	fee(s) are sub	omitted for filing.					
Please return a	ll corresp	ondence concernin	g this matter	to the following:					
	<u> </u>	Tonatha	<u>A . A</u>	Atkins ame of Person)		, A		· Krigar	<u>₹</u> - , ,;
		Sun Coast	Meter	Services	,	<u>ح</u>		- ** -	- 'a <u>-</u> -
<u>,</u>				wassee K			· .	•	
	0	rlando,	FL (City/S	32835 tate and Zip Code)	······································		O7 JAN 22 SECRETARY C TALL AHASSEE	1011	·
For further info	ormation athe	concerning this ma	itter, please ca	all: 407.4 t <u>(610)5</u> (Area Code & D	08.72	-37	2 PH 2: SEE FLOS	7	
Hou	(Name	of Person)	-11/13 a	(Area Code & D	2 9 0 3 aytime Telepi	hone Numbe	1 5	No.	
/		or the following a \$130.00 Fil Certificate of S	ing Fee &	S155.00 Filing			Filing Fee,		
				(additional copy is enc	(8	Certified C additional co	Copy py is enclosed)		
		Mailing Addres		Street/Couries					

فدنته

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
SunCoast Meler Services LL	C
(Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1023 S. Hiawassee Rd. #4035 Orlando, FL 32835	1023 S. Hiawassee Rd # 4035 Orlando, FL 32835
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regista business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Carla Deloach Br	Mant Equire NAN 22
1206 E. Ridgewood	a since
	ress (P.O. Box NOT acceptable)

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Jonathan A. Atkins 1023 S. Hiawassee pd. #4035 Orlando, FL 32835
MGRM	Howard H. Atkins 215 Cambridge Chase Exton, PA 19341
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the d (If an effective date is listed, the date must be to or 90 days after the date of filing.) REQUIRED SIGNATURE:	ate of filing:
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<u> </u>	
	or an authorized representative of a member.
of this document constituent that the facts stated here	
	ard H. Atkins Ser D
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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)