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SECRETARY OF STATE

COVER LETTER

TO:

Registration Section

Division of Cor	porations			
SUBJECT:	Ced Grunden (Name of Limite	Electric d Liability Company)		
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.		
Please return all correspondent	ondence concerning this matte	er to the following:		
<u></u>	Fred Gry	Name of Person)		
<i>F</i>		Iden Elect	ric	
	(Firm/Company)		
43	3/4 Savddo//	ar Court	TAL SE	<u>.</u>
		(Address)	CRE	
New For	t Richey / F/O	orida 346.	52	
	// (City	/State and Zip Code)	1.0	, [
			To T	•
For further information of	concerning this matter, please	call:	ORICO TATE C : 5	.
	1		≥,, -	s i
Fred a	CUNDEN OF Person	at (727) 808 (Area Code & Daytime To	Johanna Number	
(14mic	orrason)	(Alca Code & Dayline 16	reprose (vunioe)	
Enclosed is a check for	r the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S 160.00 Filing For 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	as	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Fred Grunden Electric, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,"
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,"
APTICLE II - Address

Principal Office Address: Mailing Address:

ARTICLE I - Name:

Fred Granden Electric, LIC	Fred Grow	der	nust	
New Bot Richey, FL. 34652	New Bort Richey, F	2.34	652	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registationsess entity with an active Florida registration.)	Office, & Registered Age ered Agent. You must designate an i	nt 1 Con ndividual N	nature: or another	
The name and the Florida street address of the re $FCPA$ $GCPAPA$	egistered agent are:	Y OF STA		
Name 43/4 Savddle	Mar Court	TATE	: 59	
Florida street add New Fort Richey, City, State, a	ress (P.O. Box <u>NOT</u> acceptable) FL. 34652 and Zip			

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

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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing:

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

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

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(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.)

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)